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2013 JAN 31 AN IO: 24
SECRETARY OF STATE

COVER LETTER

TO:

Registration Section
Division of Corporations

103 Front Street, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark J. Woodward, Esq.

Name of Person

Woodward, Pires & Lombardo, P.A.

Firm/Company

3200 Tamiami Trail North, Suite 200

Address

Naples, FL 34103

City/State and Zip Code

mwoodward@wpl-legal.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark J. Woodward

239 649-6555

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2013 JAN 31 AM IO: 24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

103 Front Street, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on <u>Januar</u> □ 9, 2013 ____ and assigned Florida document number <u>L13000004</u> 02 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 103 First Street, LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address . Florida Zip Code City

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member				
Title .	<u>Name</u>	Address	Type of Action	
			Add	
			Remove	
			Kelilove	
			Add	
		<u></u>	Remove	
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			Remove	
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			Kelliove	

). If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
. —	
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Dated	Jan 25, 2013.
	Signature of a member or authorized representative of a member
	Mark J. Wood war d
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

FILED
2018 JAN 31 AN IC: 24
SECRETARY OF STATE