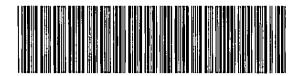
## L13000111594

(Req	uestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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FILED 2021 JAN -7 PH 3: 1,1

2/12/21

## **COVER LETTER**

Registration Section

**Division of Corporations** 

TO:

STUART I	LAND INVESTMENT LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	GARY SMIGIEL		
		Name of Person	
	STUART LAND INVESTMENT LLC		
	Firm/Company		
	7965 LANTANA ROAD		
	<del>,,,</del>	Address	
	LAKE WORTH, FL 33467		
		City/State and Zip Code	
	SMIGIELOFFICE@GMA	AIL.COM	
	E-mail address: (	to be used for future annual report notification)	
For further information co	oncerning this matter, please c	all:	
MANDY MORALES		561 968-3605 X 204	
Name of	Person	at () Area Code Daytime Telephone Number	_
closed is a check for th	e following amount:		
§ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fe Certified Copy (additional copy is enclosed) Certified Copy (additional copy is	tatus &
Mailing Address Registration S Division of C	Section orporations	Street Address: Registration Section Division of Corporations	
P.O. Box 632 Tallahassee, F		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STUART LAND INVESTMENT 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 08/07/2013 and assigned Florida document number L13000111594

This amendment is submitted to amend the following.

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"

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:

## ew Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and scept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ring filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability mpany has been notified in writing of this change.

Enter Florida street address

, Florida

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	LORI SCHWAB	7965 LANTANA ROAD	□Add
		LAKE WORTH, FL 33467	<b>=</b> Remove
			□Change
MGR	GARY SMIGIEL	PO BOX 540669	<b>=</b> Add
		LAKE WORTH, FL 33454-0669	_ □Remove
			☐Change
MGR	THOMAS MECCA	PO BOX 540669	
		LAKE WORTH, FL 33454-0669	□Remove
			□Change
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ective date, if other than the d effective date is listed, the date must be: If the date inserted in this bloc ument's effective date on the Dep	k does not meet the applicable statutory fill	(optional) more than 90 days after filing.) Pursuant to 605.020 ing requirements, this date will not be listed a
cord specifies a delayed effective of sfiled.	late, but not an effective time, at 12:01 a.m	i. on the earlier of: (b) The 90th day after the
JANUARY 5	2021	
ed JANUARY 5	2021	