

L13000146965

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

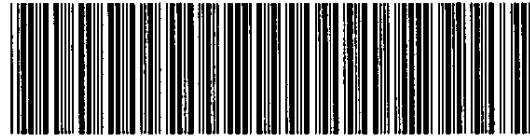
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 MAY 18 PM 1:51

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5/20/15
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Alico Sports Corridor, 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:

THAO GENTLEMAN

Name of Person

Alico Sports Corridor, LLC

Firm/Company

11347 REFLECTION ISLES BLVD

Address

FT. MYERS, FL 33912

City/State and Zip Code

VJMITCHELL3030@gmail.com

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

For further information concerning this matter, please call:

VINCENT O. MITCHELL

Name of Person

at (239) 823.9417

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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

Alico Sports Corridor, 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 10.17.2013 and assigned
Florida document number L13000146965.

This amendment is submitted to amend the following:

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

N/A

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

Enter new principal offices address, if applicable:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(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:

N/A

New Registered Office Address:

Enter Florida street address

Florida

City

2015 MAR 18 PM 4:00
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SECRETARY OF STATE
TALLAHASSEE, FL

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 605, F.S. 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.

N/A

If Changing Registered Agent, Signature of New Registered Agent

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

Title	Name	Address	Type of Action
MGR	GENTLEMAN, TRAD	11347 REFLECTION ISLE BLVD	<input checked="" type="checkbox"/> Add
		Fort MYERS, FL 33912	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MITCHELL, VINCENT	11553 PLANTATION PRESERVE	<input checked="" type="checkbox"/> Add
		Cir S.	<input type="checkbox"/> Remove
		Fort MYERS, FL 33906	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	THE SUPREME GROUP, LLC	11347 REFLECTION ISLE BLVD	<input type="checkbox"/> Add
		Fort MYERS, FL 33912	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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JUL 18 2011
CLERK OF COURT
TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here. (Attach additional sheets, if necessary.)

N/A

E. Effective date, if other than the date of filing: N/A (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated May 12th, 2015.

Vincent O. Mitchell
Signature of a member or authorized representative of a member

VINCENT O. MITCHELL
Typed or printed name of signee

2015 MAY 18 PM 1:51
CLERK OF STATE
TALLAHASSEE, FLORIDA

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