Division of Corporations

L17000142613

Florida Department of State
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From:
Account Name : JOHN M WICKER PA
Account Number : I20070000104
Phone : (239)939-2222
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Email Address: mwicker@lawcra.com

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ALTHOR LLC

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D. SCOTT
MAY 26 2017

H 17000142G 133

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

ALTHOR, 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 07/28/2014 and assigned Florida document number L14000118072.

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 "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)

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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: JOHN M. WICKER

New Registered Office Address: 12670 NEW BRITTANY BLVD, SUITE 101
Enter Florida street address

FORT MYERS, Florida 33907
City *Zip Code*

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. 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 Changing Registered Agent, Signature of New Registered Agent

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H 17000 1426 133

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
MGRM	DARIO BRENNWALD		☐ Add
			■ Remove
			☐ Change
MGRM	ALBERT GREBER		☐ Add
			■ Remove
			☐ Change
AMBR	SEBASTIEN DESROSIERS	1325 SW 5TH AVE	■ Add
		CAPE CORAL, FL 33991	☐ Remove
			☐ Change
AMBR	ANEUDY E. GONZALEZ	1325 SW 5TH AVE	☐ Add
		CAPE CORAL, FL 33991	☐ Remove
			☐ Change
AMBR	SARAH GONZALEZ	1325 SW 5TH AVE	■ Add
		CAPE CORAL, FL 33991	☐ Remove
			☐ Change
AMBR	KYLE TURNER	1325 SW 5TH AVE	■ Add
		CAPE CORAL, FL 33991	☐ Remove
			☐ Change

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

ADD AS ADDITIONAL AMBR JERSON PRADO, 1325 SW 5TH AVE, CAPE CORAL, FL 33991

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E. Effective date, if other than the date of filing: _____ **(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 22 2017

Signature of a member or authorized representative of a member

DARIO BRENNWALD Dario Brennwald

Typed or printed name of signee

Filing Fee: $25.00

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