L14000148301

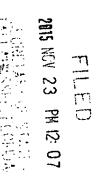
(Reque	estor's Name)	·
(Addre	55)	
(Addre	ss)	
(City/S	tate/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Busin	ess Entity Nar	ne)
(Docur	ment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ng Officer:	

Office Use Only



700278949337

11/23/15--01012--018 **25.00



COVER LETTER

	egistration Se ivision of Cor			
SUBJECT		ST. PORTABLES, LLC		
	· <u>—</u>	Name of Lin	ited Liability Company	
The enclose	ed Articles of a	Amendment and fee(s) are sub	emitted for filing.	
Please retui	n all correspo	ndence concerning this matter	to the following:	
		LINDA A. WEBER		
			Name of Person	
		GARDEN ST. PORTABL	ES, LLC	
		- 11	Firm/Company	
		3350 OLD METRO PARI	CWAY	
		·	Address	
		FORT MYERS, FL 33916		
			City/State and Zip Code	
		ROBIN@GSPORTABLES		
		E-mail address: (to be used for future annual report notifi	cation)
For further	information co	ncerning this matter, please or	all:	
KARL C. I	_ANDSTEINE	ER	239 275-6367	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	a check for the	e 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 ARTICLES OF ORGANIZATION **OF**

FILED 2015 NOV 23 PH 12: 07

GARDEN ST. PORTABLES, LLC			
(<u>Name of the Limi</u>	ted Liability Compa (A Florida Limited I	nv as it now appears on o Liability Company)	ur records.)
The Articles of Organization for this Limited L Florida document number L14000148301	iability Company	were filed on $9/22/20$	and assigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company here:	
he new name must be distinguishable and contain the v	vords "Limited Liabil	lity Company," the designa	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		3350 OLD METRO I	PARKWAY
		FORT MYERS, FL 3	3916
Enter new mailing address, if applicable:		3350 OLD METRO I	
<u>Mailing address MAY BE A POST OFFICE</u>	<u>BUA)</u>		
B. If amending the registered agent and registered agent and/or the new registered or Name of New Registered Agent:			records, enter the name of the
	3350 OLD ME	TRO PARKWAY	
New Registered Office Address:		Enter Florida str	vet address
	FORT MYERS		, Florida 33916
		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

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	ROBERT WEBER	3350 OLD METRO PARKWAY	Add
		FORT MYERS, FL 33916	□ Remove
			Change
			Remove
			Change
			Add
			□ Remove
			Change
			🗖 Add
			☐ Remove
			□ Change
			Add
			□ Remove
			Change
			
			□ Remove
			□ Change

-		_
-		_
-		_
_		_
		_
_		
_		
-		_
-		
-		215 NOV 23 PH 12: 07
_		- 影 元
_		- 199 2
		2: 91
(If an effe	october 29, 2015 (optional) ective 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 6 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed.	05.0207 (3)(b)
	ent's effective date on the Department of State's records.	sted as the
	ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear 90th day after the record is filed.	lier of:
Dated _	OCTOBER 29 2015	
	$f(x) = f(x) \cdot f(x)$	

Page 3 of 3

Typed or printed name of signce

Filing Fee: \$25.00