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| (Requestor's Name)<br>(Address)<br>(Address)                                    | 500300532635                      |
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| (Document Number) Certificates of Status Special Instructions to Filing Officer | 17 JUN 20 AM &<br>ALLAHASSEE, FLO |
|   | ₽:49<br>LORIDA                    |
| Office Use Only   |                                   |
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| •  |  |   |   |
|--|--|---|---|
|  | 4  | COVER LETTER  |   |
| TO: Registration Sec<br>Division of Corp |  |   |   |
| CHR Acquis<br>SUBJECT:                   | itions, LLC  |   |   |
|  |  | ited Liability Company  |   |
|  |  |   |   |
|  | mendment and tee(s) are sub  |   |   |
| Please return all correspon              | dence concerning this matter   | to the following:   |   |
|  | Monica Flowers Crews   |   |   |
|  |  | Name of Person  |   |
|  | CHR Acquisitions, LLC  |   |   |
|  |  | Firm Company  |   |
|  | 6231 Estero Boulevard  |   |   |
|  |  | Address   |   |
|  | Fort Myers Beach, FL 339   | City/State and Zip Code   |   |
|  | monicaf(@sunstream.com   | City/State and Zip Code   |   |
|  | E-mail address: (  | to be used for future annual rep  | ort notification)   |
| For further information co               | ncerning this matter, please ca  | 111:  |   |
| Monica Flowers Crews                     |  | at ()   |   |
| Name of                                  | Person   | Area Code   | Daytime Telephone Number  |
| Enclosed is a check for the              | following amount:  |   |   |
| ■ \$25.00 Filing Fee                     | □ \$30.00 Filing Fee &<br>Certificate of Status                          | \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | Certificate of Status &<br>Certificate of Status &<br>Certified Copy<br>additional copy is enclosed |
| Registrat<br>Division<br>P.O. Boy        | SG ADDRESS:<br>tion Section<br>of Corporations<br>C6327<br>see, FL 32314 | Registratior<br>Division of<br>Clifton Buil                             | Corporations  |

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| CHR Acquisitions, LLC   |  |                              |
|---|--|------------------------------|
| ( <u>Name of the Limited Liability C</u><br>(A Florida Lin  | Company as it now appears on our records.)<br>nited Liability Company) |                              |
| The Articles of Organization for this Limited Liability Com<br>Torida document number <u>L15000039681</u>   | pany were filed on $\frac{03/04/2015}{2000}$                           | and assigned                 |
| his amendment is submitted to amend the following;  |  |                              |
| A. If amending name, <u>enter the new name of the limited</u>   | l liability company here:  |                              |
| he new name must be distinguishable and contain the words "Limited  | Liability Company," the designation "ELC" of                           | or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable:   |  |                              |
| Principal office address MUST BE A STREET ADDRES  | <u></u>  |                              |
| Enter new mailing address, if applicable:<br><u>Mailing address MAY BE A POST OFFICE BON</u><br>3. If amending the registered agent and/or registere<br>registered agent and/or the new registered office address | ed office address on our records.<br><u>s herc</u> :                   | 17 JUN 20 Atte of A          |
| Name of New Registered Agent:   |  |                              |
| New Registered Office Address:  | Enter Florida street address   |                              |
|   |  |                              |
|   | , Flori  | ida<br>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. Thereby 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, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

## MGR = Manager AMBR = Authorized Member

| <u>Title</u> | Name             | Address                    | Type of Action        |
|--------------|------------------|----------------------------|-----------------------|
| MGR          | T. Chadwick Lund | 6231 Estero Boulevard      | ₽ Add                 |
|              |                  | Fort Myers Beach, FL 33931 | Remove                |
|              |                  |                            | Change                |
|              |                  |                            | 🗆 Add                 |
|              |                  |                            | Remove                |
|              |                  |                            | Change                |
|              |                  |                            | Add                   |
|              |                  | . <u></u>                  | Remove                |
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|              |                  |                            | 7 JUN 20<br>LANDARY L |
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|              |                  |                            | Change                |

| .D: | If amending any other | information, | enter change(s) here: | (Attach additional sheets | , if necessary.) |
|-----|-----------------------|--------------|-----------------------|---------------------------|------------------|
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(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) <u>Note:</u> 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 June 8 | 2017   |
|--------------|--|
|              | X  |
|              | Signature of a member or authorized representative of a member |

David A. Lawrence

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00