

U500012309

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

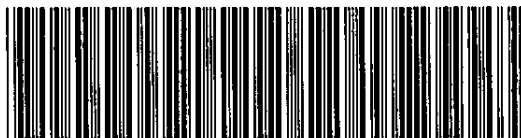
(Business Entity Name)

(Document Number)

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15 JUL 31 PM 4:40
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JUL 31 2015

AUG 03 2015
S. YOUNG



ATTORNEYS AT LAW

Cristy N. Gibson

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Fort Myers, Florida 33966

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July 30, 2015

Via Federal Express

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Document No. L15000112309

Dear Sir/Madam:

Attached you will find an Articles of Amendment to Articles of Organization for Cape Bucks LLC, an entity registered with the Division per the referenced Document No. along with our firm's check for \$25.00 to cover the filing fee for same.

Please return the acknowledge of filing for same to the undersigned utilizing the enclosed pre-paid return envelope.

Should you have any questions, please do not hesitate to contact our office.

Very truly yours,

A handwritten signature in cursive script, appearing to read "Cristy N. Gibson".

Cristy N. Gibson, FRP
Paralegal

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Cape Bucks 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:

Douglas L. Waldorf, Esq.

Name of Person

Rogers Towers PA

Firm/Company

13350 Metro Parkway, Suite 302

Address

Fort Myers, FL 33966

City/State and Zip Code

dwaldorf@rtlaw.com

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

For further information concerning this matter, please call:

Douglas L. Waldorf

239 4251799
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" 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 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

FILED
15 JUL 31 PM 4:42
TALLAHASSEE, FL
SECRETARY OF STATE

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Cape Bucks 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 06/29/2015 and assigned
Florida document number L15000112309.

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)

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:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
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> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-----------------------------|---------------------------|--|
| MGR | IPE 1031 Accommodators, LLC | 1922 Ingersoll Avenue | <input type="checkbox"/> Add |
| | | Des Moines, IA 50309 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | Scott A. Andersen | 5630 Coronado Court | <input checked="" type="checkbox"/> Add |
| | | Cape Coral, Florida 33904 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
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[illegible]

(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)

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.

Signature of a member

Typed or printed name of signee

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15 JUL 31 PM 4:42
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