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SECRETARY OF STATE

**S Warren** APR 1 9 2017

## **COVER LETTER**

SUBJECT:	NAPLES REAL E	STATE EXCHANGE, LLC	
Bedgeet.	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspor	dence concerning this matter	to the following:	
	BRIAN J. THANASIU		
	<del></del>	Name of Person	
	CHEFFY PASSIDOMO, F	P.A.	
		Firm/Company	
	821 FIFTH AVENUE SOU	JTH	
		Address	
	NAPLES, FLORIDA 3410	)2	
		City/State and Zip Code	<del></del>
	BJTHANASIU@NAPLESI E-mail address: (1	AW,COM to be used for future annual report notifi	cation)
For further information co	ncerning this matter, please ca	·	,
BRIAN J. THANASIU	,,	239 436-1524	
Name of	Person	at ()	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:

TO:

Registration Section Division of Corporations

> 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**

NA:	PLES REAL ESTA	ATE EXCHANGE, L	LC	
(Name of the Limit	ed Liability Compa (A Florida Limited)	<b>ny as it now appears (</b> Liability Company)	on our records.)	<del></del>
he Articles of Organization for this Limited L orida document number		were filed on	07/20/2015	and assigned
nis amendment is submitted to amend the foll-				
If amending name, enter the new name o	f the limited liab	ility company here	<b>:</b>	
OLI	DE NAPLES REAL	L ESTATE, LLC		
e new name must be distinguishable and contain the v	ords "Limited Liabi	lity Company," the desi	gnation "LLC" or the a	bbreviation "L.L.C."
nter new principal offices address, if applic	able:	536 PARK STRE	ЕТ	₹.o. →
Principal office address MUST BE A STREE		NAPLES, FL 341	02	100 <b>7</b>
nter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE</u> . If amending the registered agent and		ffice address on o	our records, <u>enter</u>	7 AM11: 09 of the
gistered agent and/or the new registered of	fice address her	<u>e</u> :		
Name of New Registered Agent:	CHEFFY PASSIDOMO, P.A.			
New Registered Office Address:	821 FIFTH AVENUE SOUTH			
		Enter Florida	a street address	
	NAPLES		, Florida <u></u>	1102
		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 Brian T. Thanson, AR

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> Name **Address Type of Action** \_□ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove \_□ Change \_ Add ☐ Remove \_□ Change □ Add □ Remove

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ective date, if other than the da	ite of filing:	(opti	ional)
<b>ective date, if other than the da</b> n effective date is listed, the date must b te: If the date inserted in this block	specific and cannot be prior to da	e of filing or more than 90 days afte	r filing.) Pursuant to 605.0207 is date will not be listed as t
cument's effective date on the Department		mataroty ming requirements, m	is dute will not be noted to
record specifies a delayed e		effective time, at 12:01	a.m. on the earlier of:
The 90th day after the recor	d is filed.		,
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10	Preston 1	Ilella Mai	TAR T
Si	gnature of a member or authorized	representative of a member	
	$\boldsymbol{\nu}$		
	CHRIS WE	IC	

Page 3 of 3

Filing Fee: \$25.00

April 13, 2017

Olde Naples Real Estate, Inc. P.O. Box 425 Naples, FL 34106

Department of State Division of Corporation Clifton Building 2661 Executive Center Cir. Tallahassee, FL 32301

RE: Dissolution of Olde Naples Real Estate, Inc. and Approval to Release Name

### To whom it may concern:

I am the president and sole director and shareholder of Olde Naples Real Estate, Inc., a Florida corporation. This letter is to advise you that Olde Naples Real Estate, Inc., a Florida corporation, has been dissolved pursuant to the enclosed Articles of Dissolution.

At this time, application has been made for the organization of a separate and distinct entity, Olde Naples Real Estate, LLC, a Florida limited liability company. I hereby declare that I have no intention of ever reinstating Olde Naples Real Estate, Inc., a Florida corporation, and I hereby release the name, Olde Naples Real Estate, to the new limited liability to be formed and known as, Olde Naples Real Estate, LLC, a Florida limited liability company.

Please do not hesitate to contact me if you should have any questions and/or concerns.

mank you,

Tsa Anastasia Reisman

FILED

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SECRETARY OF STATE
TALL AHASSEE, FLORIDA