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Division of Corporations

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From:

Account Name : COHEN & GRIGSBY, P.C.

Account Number : I2003000042

: (239)390-1912

Phone

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 1ST AVENUE SOUTH 1095, LLC

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Help

T. LEWIEUX EEC 0 ' 2013

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1st Avenue South 1095, LLC	
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on September 1, 2015 and assigned
Florida document number L15000150139	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>
Principal office address MUST BE A STREET ADDRESS)	C 2019
	4 × 5
Enter new mailing address, if applicable:	
<u>Mailing address MAY BE A POST OFFICE BQX)</u>	
	□ □ लें स्थ
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here	fice address on our records, enter the name of th
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

(((H190003532No. 3057, P.)

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
AMBR	Natalie Rogers	1010 Central Avenue	П / н
		Naples, FL 34102	
		17aptes, 1 D 34102	■ Remove
			Change
AMBR	David S. Rogers	1010 Central Avenue	

		Naples, FL 34102	□ Remove
			□ Change
			Remove
			☐ Change
			□ Remove
			☐ Change
			□ Remove
			☐ Change
			□ Add
			Remove
			Change

0 e c. 6.	2019 11:47PM	COHEN & GRIGS			1003532 ^N © (80,5,7)	, P. 4
D. If ame	nding any other info	ermation, enter cha	nge(s) here; (Attac	h additional sheets,	if necessary.)	
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(If an effe Note:	ve date, if other that ective date is listed, the dat If the date inserted in the ent's effective date on t	e must be specific and ca sis block does not mee	innot be prior to date of f it the applicable statu	iling or more than 90 da		
	ord specifies a del 90th day after the		e, but not an effe	ective time, at 12	$2:01$ a.m. on the ϵ	earlier of:
Dated _	Natalic Rogers	3 U Suprature of a mei	2019	sentative of a member		
	Natalic Rogers	Natalic	Rogers rped or printed harne of	signee		_

Page 3 of 3

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