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COVER LETTER

TO: Registration S Division of Co			
SUBJECT: N	aples Parking Name of Un	Enforcement ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		Fany Gries	er_
	Nay	desparking Er	forcement LLC
	3511 1	7th St SW Address	
	Naple	J. J. 34117 City/State and Zip Code	
	Papus Da E-mail address: (arking Comay to be used for fuller annual report notif	Locom lication)
For further information of	concerning this matter, please c	all:	
Tittany	Person	at (2391) 60 Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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

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 TO ARTICLES OF ORGANIZATION OF

U	
Name of the Limited Liability Compa (A Florida Simited L	
The Articles of Organization for this Limited Liability Company Florida document number <u>L 150061716569</u>	
This amendment is submitted to amend the following:	- · · · · · · · · · · · · · · · · · · ·
A. If amending name, <u>enter the new name of the limited liabi</u>	lity company here:
The new name must be distinguishable and contain the words "Limited Liabil Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	3511 17th St-SW Napus, FL 34117
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3511 17th St SW Naplus, FL 34117
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent:	uny Grieser
New Registered Office Address: 3011	Enter Florida street address
Nago	City, Florida 34117

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 = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
P_	Oherrie Cecil	882 Romebird St	Add
		Naples #634104	Remove
			Change
<u>P</u>	Tiffany Grieser	3511 17th St-SW	Add
	O .	3511 17th St-SW Napus 32 34117	/ □ Remove
			Change
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	ther than the date of filing: 5.10.2016 (options	
tive date, if oth	ther than the date of filing: 5.10.00 (optional ted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing or more fillness after	a l) ng.) Pursuant to 605.0
If the date inse	erted in this block does not meet the applicable statutory filing requirements, this date on the Department of State's records.	ate will not be listed
mem s enective i	tate on the Department of State's records.	
cord specifies	es a delayed effective date, but not an effective time, at 12:01 a.m	n. on the earlier
	fter the record is filed.	
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Mu.	<u>4 86 , 2016</u> .	
	$M \sim 20^{\circ}$	20
	Signature of a member or authorized representative of a member	<u> </u>
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	Chemie Deil 33	<u>.</u>
	Typed or printed name of signee	क्ता भाग
		S. D.

Filing Fee: \$25.00