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SECRETARY OF STA ALLAHASSEE, FLOR

FILED

COVER LETTER

TO: Registration Set Division of Con			
Terrapin R	iver LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jose Nunez		
		Name of Person	
		Firm/Company	
	460 13th St SW		
		Address	
	Naples, FL 34112		
	jose@nunez.biz	City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	ication)
For further information of	concerning this matter, please c	all:	
Jose Nunez		239 370-9008	
Name (of Person	at () 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 (additional copy is enclosed)
MAII.	JNG ADDRESS:	STREET/COURII	ER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Terrapin River LLC		
(<u>Name of the Limited Li</u> (A F)	iability Company as it now appears on our records.) lorida Limited Liability Company)	
The Articles of Organization for this Limited Liabili Florida document number	ity Company were filed on	and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	limited liability company here:	
Nunez Real Estate & Development LLC		
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applicable	:	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		the mame of the new
Name of New Registered Agent:		M-K ±
New Registered Office Address:	Enter Florida street address	To The Transfer of the Transfe
	·	
_	, Florida _	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, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□ Add
			☐ Remove
			☐ Change
			□ Add
			□ Remove
			□ Add
			☐ Remove
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on effective date is listed, the date must be ote: If the date inserted in this block	specific and cannot be	prior to date of filing or	nore than 90 days after f	iling.) Pursuant to 60	05.0207 (3
ocument's effective date on the Depa	tment of State's rec	ords.	ng requirements, this	aate will not be its	neu as m
e record specifies a delayed e The 90th day after the record	fective date, but is filed.	: not an effective	time, at 12:01 a.	m. on the earl	ier of:
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May 2	2018	<u> </u>	1		
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Filing Fee: \$25.00