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COVER LETTER

TO: Registration Se Division of Cor	ction porations	,	
STABILIZE	ED STEPS, LLC		
SUBJECT:	Name of Limit	ed Liability Company	
	Amendment and fee(s) are submondence concerning this matter t		
	BRUCE H. VANDERLAA	N	
		Name of Person	
	BRUCE H. VANDERLAA	N, ATTORNEY AT LAW, P.A.	
		Firm/Company	
	1500 ROYAL PALM SQL	JARE BOULEVARD, SUITE 1	01
	<u></u>	Address	·
	FORT MYERS, FL 3391	9	
	BRUCE@BRUCEVANDE	City/State and Zip Code	
	_	to be used for future annual report no	otification)
For further information	concerning this matter, please ca	all:	
BRUCE VANDERLAA	AN	239 220-3326 a1 ()	
Name	of Person	Area Code Dayti	me Telephone Number
Enclosed is a check for	the 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)
МАП	LING ADDRESS:	STREET/COU	RIER 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

STABILIZED STEPS, LLC		
(Name of the Limited Liability (A Florida	y Company as it now appears on our reco Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Co Florida document number <u>L16000034905</u>	ompany were filed on 02/18/2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi		18 E
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "I	LC" or the abbreviation #L.C"
Enter new principal offices address, if applicable:		OB NOT
(Principal office address MUST BE A STREET ADDR	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our reco lress here:	ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ad	dress
		, 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>	Address	Type of Action
VP	ERYK HARDWICK	5258 GOLDEN GATE PKWY	
		SUITE 107	■ Remove
		NAPLES, FL 34116	□ Change
P STEPHANIE C. GOMEZ	STEPHANIE C. GOMEZ	5258 GOLDEN GATE PKWY	Add
		SUITE 107	■ Remove
		NAPLES, FL 34116	☐ Change
MGR	MGR STEPHANIE C. GOMEZ	5258 GOLDEN GATE PKWY	■ Add
		SUITE 107	Remove
		NAPLES, FL 34116	hange -
			N □ Removes
			7: Change
			☐ Add
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(If an effection Note: 1	e date, if other than the date of filing: tive date is listed, the date must be specific and cannot be prior to date of filing or more the date inserted in this block does not meet the applicable statutory filing at's effective date on the Department of State's records.	(optional re than 90 days after filin requirements, this date	g.) Pursuant to 60	5.0207 (3) ted as the
the reco	rd specifies a delayed effective date, but not an effective til Oth day after the record is filed.	me, at 12:01 a.m	. on the earl	ier of:
Dated_	7/25/2018 Seus Eigh Ha	ordend L		
	Signature of a member or authorized representative of			

Page 3 of 3

Filing Fee: \$25.00