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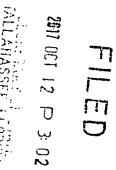
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| Certified Copies          | Certificates     | s of Status |
| Special Instructions to F | Filing Officer:  |             |
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## **COVER LETTER**

TO:

Registration Section

| Div                   | ision of Cor                      | porations  |  |   |            |
|-----------------------|-----------------------------------|--|--|---|------------|
|                       | StudioPlus                        | Investment Property1 LLC                                       |  |   |            |
| SUBJECT:              | Name of Limited Liability Company |  |  |   |            |
|                       |                                   | Amendment and fee(s) are sub                                   |  |   |            |
| Please return         | all correspo                      | indence concerning this matter                                 | to the following:  |   |            |
|                       |                                   | Mike Lendino   |  |   |            |
|                       |                                   |  | Name of Person   |   |            |
|                       |                                   | StudioPlus Investment Pro                                      | pertyl LLC   |   |            |
|                       |                                   |  | Firm/Company   |   | 2          |
|                       |                                   | 12271 Towne Lake Drive   |  |   |            |
|                       |                                   |  | Address  | HAS:  | 2 <u>-</u> |
|                       |                                   | Fort Myers FL 33913  |  | i   | <b>.</b>   |
|                       |                                   | -  | City/State and Zip Code  |   | ے ر        |
|                       |                                   | mikel@studioplusarch.com                                       |  |   | )<br>)     |
| For further in        | nformation c                      | e-mail address: ( oncerning this matter, please of             | to be used for future annual report not                                      | incation) F   | 3          |
| Mike Lendin           |                                   | ,  | 239 271-0355<br>at ( )   |   |            |
|                       | Name o                            | f Person   |  | ne Telephone Number   |            |
| Enclosed is a         | check for th                      | ne following amount:   |  |   |            |
| □ \$25.00 F           | iling Fee                         | □ \$30,00 Filing Fee &<br>Certificate of Status                | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)          | ☐ \$60.00 Filing Fee,<br>Certificate of Stat<br>Certified Copy<br>(additional copy is end | tus &      |
|                       | Registr<br>Divisio<br>P.O. Bo     | ING ADDRESS:<br>ation Section<br>on of Corporations<br>ox 6327 | STREET/COUR<br>Registration Section<br>Division of Corpo<br>Clifton Building | on<br>rations   |            |
| Tallahassee, FL 32314 |                                   | 2661 Executive Co  | emer Circle  |   |            |

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

StudioPlus Investment Property1 LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{04/04/2016}{1}$ and assigned Florida document number L16000067008 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 12271 Towne Lake Drive Enter new principal offices address, if applicable: Fort Myers FL 33913 (Principal office address MUST BE A STREET ADDRESS) 12271 Towne Lake Drive Enter new mailing address, if applicable: Fort Myers FL 33913 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Mike Lendino Name of New Registered Agent: 12271 Towne Lake Drive New Registered Office Address: Enter Florida street address Fort Myers Florida

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.

New Registered Agent's Signature, if changing Registered Agent:

City

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3,

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 |
|--------------|-----------------|------------------------|----------------|
| MGR          | Mike Lendino    | 12271 Towne Lake Drive |                |
|              |                 | Fort Myers FL 33913    | Remove         |
|              |                 |                        | Change         |
| MGR          | Damon Romanello | 12271 Towne Lake Drive | Add            |
|              |                 | Fort Myers FL 33913    | Remove         |
|              |                 |                        | ■ Change       |
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|              |                 |                        | □ Remove       |
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| ctive date, if other than the da   | ate of filing:          |                     | (opt                     | ional) 2                   |              |
| effective date is listed, the date must b<br>:: If the date inserted in this block |                         |                     | r more than 90 days afte | er filing.) Pursuant to 60 |              |
| iment's effective date on the Department   | artment of State's reco | ords.               |                          |                            |              |
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| Ontubus II   | 2017                    |                     |                          |                            |              |
| October 11   | 2017                    | ·                   |                          |                            |              |
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| 11/1/21  |                         |                     |                          |                            |              |

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Filing Fee: \$25.00