## 11600125624

| (Re                     | equestor's Name)   | <u> </u>    |
|-------------------------|--------------------|-------------|
| (Ad                     | dress)             |             |
| (Ad                     | ldress)            | -           |
| (Cit                    | ry/State/Zip/Phone | ⇒ #)        |
| PICK-UP                 | WAIT               | MAIL        |
| (Bu                     | siness Entity Nar  | ne)         |
| (Do                     | ocument Number)    |             |
| Certified Copies        | _ Certificates     | s of Status |
| Special Instructions to | Filing Officer:    |             |
|                         |                    |             |
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## **COVER LETTER**

|                 | gistration Sec<br>vision of Corp |  |   |   |
|-----------------|----------------------------------|--|---|---|
| CHID FECT.      | RK Coastal F                     | Properties, LLC                              |   |   |
| SUBJECT:        |                                  | Name of Limited Liability Company            |   |   |
|                 |                                  | mendment and fee(s) are sub                  | •   |   |
|                 | cocspc                           | Richard Losee                                | to the tonowing.  |   |
|                 |                                  |  | Name of Person  |   |
|                 |                                  | RK Coastal Properties, LL                    | С   |   |
|                 |                                  |  | Firm/Company  |   |
|                 |                                  | 9911 Corkscrew Road - Su                     | nite 202  |   |
|                 |                                  |  | Address   |   |
|                 |                                  | Estero, FL 33928                             |   |   |
|                 |                                  |  | City/State and Zip Code   |   |
|                 |                                  | rlosee@laidesignassoc.com                    | to be used for future annual report noti                            | fication)   |
| For further i   | information cor                  | ncerning this matter, please ca              | •   | neation   |
| Richard Lo      | see                              |  | 239 405-6890  |   |
| ,               | Name of I                        | Person                                       | Area Code Daytim  | e Telephone Number  |
| Enclosed is     | a check for the                  | following amount:                            |   |   |
| <b>5</b> 25.001 | Filing Fee                       | □ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |

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

| RK Coastal Properties, LLC  |  |                       |
|---|--|-----------------------|
| (Name of the Limited Liability<br>(A Florida L                    | Company as it now appears on our records.) imited Liability Company) |                       |
| he Articles of Organization for this Limited Liability Cor        | npany were filed on June 30, 2016                                    | and assigned          |
| lorida document number L16000125624                               |  |                       |
| his amendment is submitted to amend the following:                |  |                       |
| A. If amending name, <u>enter the new name of the limite</u>      | ed liability company here:   |                       |
| he new name must be distinguishable and contain the words "Limite | d Liability Company," the designation "LLC" or the                   | abbreviation "L.L.C." |
| Enter new principal offices address, if applicable:               |  |                       |
| Principal office address MUST BE A STREET ADDRE                   | SS)  |                       |
|   |  |                       |
|   |  |                       |
| Enter new mailing address, if applicable:                         |  |                       |
| Mailing address MAY BE A POST OFFICE BOX)                         |  |                       |
|   | <u></u>  |                       |
|   |  |                       |
| 3. If amending the registered agent and/or register               |  | er the name of the    |
| egistered agent and/or the new registered office addre            | ss nere:   | A S                   |
| Name of Navy Posistaned Agents                                    |  | LAH.                  |
| Name of New Registered Agent:                                     |  | SS N                  |
| New Registered Office Address:                                    | Form Florida de 11   | MAX • F               |
|   | Enter Florida street address   | ARY OF S              |
|   | , Florida  | S Zip Code            |
|   | City   | = - LIDLCode          |

## 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 |
|--------------|-------------------|-----------------------------|----------------|
| AMBR         | Lynda Diane Losee | 11808 Solemar Court         | ■ Add          |
|              |                   | Estero, FL 33928            | ☐ Remove       |
|              |                   |                             | ☐ Change       |
|              |                   |                             | □ Add          |
|              |                   |                             | Remove         |
|              |                   |                             |                |
|              |                   | -17 <del>8-27-10-11-1</del> | Add            |
|              |                   |                             | Remove         |
|              |                   | <del> </del>                | Change         |
|              |                   |                             | AHAS SEE. F.   |
|              |                   |                             | Rentove        |
|              |                   |                             |                |
|              |                   |                             | □ Remove       |
|              |                   |                             | ☐ Change       |
|              |                   |                             | Add            |
|              |                   |                             | Remove         |
|              |                   |                             | ☐ Change       |

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| i gian                        | June 26, 2017  | ( 0 : 1    | **              |               |    |
| 'an eff<br><mark>Vote:</mark> | to date, if other than the date of filing:  [Option of the date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after fithe date inserted in this block does not meet the applicable statutory filing requirements, this not's effective date on the Department of State's records.  | fffing.) P | u <b>k©</b> ant |               |    |
| e red<br>The                  | ord specifies a delayed effective date, but not an effective time, at 12:01 a<br>90th day after the record is filed.   | ı.m. or    | the             | earlie        | ro |
|                               |  |            |                 |               |    |
| ated                          | une 26, 2017   |            |                 |               |    |
| ated                          | / ///  |            |                 |               |    |
| ated                          | Signature of a member or authorized representative of a member   |            |                 | <del></del> . |    |

Page 3 of 3

Filing Fee: \$25.00