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COVER LETTER

Divi	ision of Corp	orations		•
SUBJECT:	270 S TAMI.	ami trail, llc		
		Name of Limi	ited Liability Company	
The enclosed	Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return	all correspond	dence concerning this matter	to the following:	
		Thomas C. Tyler, Jr.		
			Name of Person	
			Firm/Company	
		735 E. Venice Avenue, Sui	ite 200	
			Address	<u> </u>
		Venice, FL 34285		
			City/State and Zip Code	
		elise@tyleroffices.com		
		E-mail address: (t	o be used for future annual report	notification)
For further in	formation cor	cerning this matter, please ca	ıll:	
Tom Tyler o	r Elise Durano	ceau	941 488-442 at ()	
	Name of F	Person	at ()	ytime Telephone Number
Enclosed is a	check for the	following amount:		
■ \$25.00 F	iling 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)

. MAILING ADDRESS:

TO:

Registration Section

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 • TÓ ARTICLES OF ORGANIZATION OF

270 S TAMIAMI TRAIL, LLC				
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number <u>L16000206402</u>	were filed on 11/09/2016	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the	ne abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	855 Chalmers Drive			
(Principal office address MUST BE A STREET ADDRESS)	Venice, FL 34293			
Enter new mailing address, if applicable:	855 Chalmers Drive			
(Mailing address MAY BE A POST OFFICE BOX)	Venice, FL 34293	· · · · · · · · · · · · · · · · · · ·		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ter the name of the na		
Name of New Registered Agent:		TE STATE		
New Registered Office Address:	Enter Florida street address			
	, Florida	Tin 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
MGR	ROGER BALDINGER	855 Chalmers Drive	
		Venice, FL 34293	□ Remove
			☐ Change
MGR	JOSEPH KONDISKO	735 E. Venice Avenue	
		Suite 210	■ Remove
		Venice, FL 34285	□ Change
			Add
			Remove Remove Remove
			☐ Change
			Add
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Effective date, if other than the difference date is listed, the date must be	e specific and cannot be k does not meet the ap	pplicable statu	filing or more than 9 tory filing require	(optional) 0 days after filing.) ments, this date v	Pursuant to 605.0207 vill not be listed as
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