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W. S. R. C. R. C.

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: MANATEE REAL ESTATE COMPANY & Stuart, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
James Peck Name of Person
Manatee Real Estate Company of Stuart, LLI
•
4629 SE DIXIE HWY
Stuant, FL 34997 City/State and Zip Code
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (772) 266-2300 Area Code Daytime Telephone Number
Name of Person Near Civil Physinia Telephone Number
Content in a skead for the following agreement
Enclosed is a check for the following amount:
S25.00 Filing Fee Satus Certificate of Status Certified Gopy Certificate of Status Certified Copy (additional copy is enclosed) S25.00 Filing Fee Satus Certified Gopy Certified Copy (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section

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

Manatee Reac Estate Company of Stuart LLC
(Name of the Limited Liability Company at it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Florida document number	Company were	filed on July	4 2017 an	d assigned
Florida document number L 17 Ø ØØØ	<u>03</u> \$\phi63	,	•	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the li	mited liability c	ompany here:		
The new name must be distinguishable and contain the words "L	imited Liability Co	inpany," the designation "LI	LC" or the abbreviation	on "L.IC."
Enter new principal offices address, if applicable:				2913
(Principal office address MUST BE A STREET ADI	DRESS)			ا ع
			202	N FAREE
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Enter new mailing address, if applicable:			<u> </u>	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			22.	
			<u> </u>	&
registered agent and/or the new registered office ac Name of New Registered Agent:	ldress here:			
New Registered Office Address:				
		Enter Florida street addi	ress	
		iw, I	Florida	· · ·
New Registered Agent's Signature, if changing Registe		II.	Z.tp C	zoae
			e	
I hereby accept the appointment as registered ager provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the registe company has been notified in writing of this chang	l complete perfo agent as provie cred office addr	rmance of my duties, led for in Chapter 60:	and I am familia 5, F.S. Or, if this	r with and document is
	If Changing 1	Registered Agent, <u>Signatur</u>	re of New Registered	Agent
		I		

Page 1 of 3

If amending or removed	g Authorized Person(s) authorized to ma from our records:	ападе, <u>enter the</u>	title, name, and address of each person being added
MGR = N AMBR = A	lanager authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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	€		
MBR	James Pect		
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ective	e date, if other tha	in the date	of filing: _	July	14	2817	(optiona	ıl)	
effect	tive date is listed, the di the date inserted in									
	t's effective date on									
<u>e:</u> If										
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Filing Fee: \$25.00