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| TO: Registration So Division of Cor | | | |
| subject: <u>С</u> 5. | I South Flor: | Ja Enterprises, | llc |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | Authory J | Name of Person | |
| | Woodward P.1 | es; Lombardo, P | .A. |
| | 606 Bald Eag | Address 1 Suite | 500 |
| | | Chry/State and Zo Code | |
| | <u>adimora@</u> E-mail address: (| to be used for future annual report no | otification) |
| For further information c | oncerning this matter, please co | all: | |
| Anthony | J. D'. Mora | at (<u>139</u>) <u>394</u> Area Code Dayti | me Telephone Number |
| Enclosed is a check for t | ne following amount: | | |
| ☑ \$25.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Registr Divisio P.O. B | ING ADDRESS: ration Section on of Corporations ox 6327 rassee, FL 32314 | STREET/COUP Registration Sect Division of Corp Clifton Building 2661 Executive C Tallahassec, FL 3 | orations Center Circle |

| A DTICLES OF | AMENDMENT |
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| ARTICLES OF | FAMENDMENT |
| ARTICLES OF | ORGANIZATION ♣ ♣ ♣ ♣ ♣ ♣ ♣ ♣ ♣ ♣ ♣ ♣ ♣ ♠ ♣ ♠ ♠ ♠ ♠ |
| ARTICLES | OF = AA |
| | SSE SE |
| CII South Florida | Enterprises, CLC |
| (Name of the Limited Liability Comp | pany as it now appears on our records.) |
| | 49 D.H. |
| The Articles of Organization for this Limited Liability Compan | y were filed on April 7 dol7 and assigned |
| Florida document number <u>L17000079618</u> . | |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited lia | ability company here: |
| | |
| The new name must be distinguishable and contain the words "Limited Lial | bility Company," the designation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 3812 Isla Del Sol Way |
| (Principal office address MUST BE A STREET ADDRESS) | Naples, FL 34114 |
| 1. The part of the name of the part of the | |
| | - |
| Parkers and the state of the skill | 2012 701 MJ Col (1) |
| Enter new mailing address, if applicable: | BBIZ Isla Del Sol Way Naples FL 34/14 |
| (Mailing address MAY BE A POST OFFICE BOX) | Noples FC 39/19 |
| | |
| The state of the state of the state of | |
| registered agent and/or the new registered office address he | office address on our records, enter the name of the new |
| | |
| Name of New Registered Agent: AASA | nong J. Dimora FSq. |
| • | 11 |
| New Registered Office Address: 606 B | Ender Florida street address TStand Florida Florida Tip Code |
| Maxe | Florida 34145 |
| | City Zip Code |
| New Registered Agent's Signature, if changing Registered Agen | <u>ıt:</u> |
| I hereby accept the appointment as registered agent and as | gree 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

Page 1 of 3

| | authorized Person(s) authorized to man | age, enter the title, name, and address of | each person being added |
|-------------------------|--|--|-------------------------|
| MGR = Mar AMBR = Aut | nager horized Member | | |
| <u> Title</u> | Name | Address | Type of Action |
| AMBR | Cheryl L. Ningard | 3812 Isla Del Sol Way | ☑ Add |
| | | Naples FL 34114 | □ Remove |
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| f amending any other information, enter change(s) here: | Attach additional sheets, if necessary.) |
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| ffective date, if other than the date of filing: | (optional) |
| an effective date is listed, the date must be specific and cannot be prior to da lote: If the date inserted in this block does not meet the applicable ocument's effective date on the Department of State's records. | te of filing or more than 90 days after filing.) Pursuant to 605 0207 is statutory filing requirements, this date will not be listed as t |
| e record specifies a delayed effective date, but not an The 90th day after the record is filed. | |
| Jecember 21. 2017 Jensture of a member or authorized JEFF FR 7 Typed of printed name | |
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| Segnature of a member or authorized | representative of a member |
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Page 3 of 3

Filing Fee: \$25.00