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COVER LETTER

TO:	Registration Division of	on Section Corporations	
CUDIE		CAMINIO REAL, LLC	
SUBJE	UI:	Name of Limited Liability Company	
The enc	losed Article:	es of Amendment and fee(s) are submitted for filing.	
Please re	eturn all corre	respondence concerning this matter to the following:	
		Robert E. Messick, Esq.	
		Name of Person	
		Icard, Merrill, Cullis, Timm, Furen & Ginsburg, P.A.	
		Firm/Company	
		2033 Main Street, Suite 600	
		Address	
		Sarasota, Florida 34237	
		City/State and Zip Code	
		rmessick@icardmerrill.com E-mail address: (to be used for future annual report notification)	
For furth	her informati	ion concerning this matter, please call:	
Robert	E. Messick, I	Esq. 941 366-8100 at ()	
	Na	at () mme of Person Area Code Daytime Telephone Number	
Enclose	d is a check f	for the following amount:	
\$25	.00 Filing Fe	Certificate of Status Certified Copy (additional copy is enclosed) S50.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (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

4470 Camino Real, LLC		
(<u>Name of the Limited Liability</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on May 23, 2017	and assigned
(Name of the Limited Liability Company as it now apport (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on Florida document number L17000115241 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company The new name must be distinguishable and contain the words "Limited Liability Company," the Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address or registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	_•	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRI	ESS)	ARE SE
		N S S S S S S S S S S S S S S S S S S S
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		5 8
		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	dement is submitted to amend the following: Inding name, enter the new name of the limited liability company here: In must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." In principal offices address, if applicable: In mailing address MUST BE A STREET ADDRESS) In mailing address, if applicable: In mailing address MAY BE A POST OFFICE BOX) In mailing address and/or registered office address on our records, enter the name of the new agent and/or the new registered office address here: Idame of New Registered Agent: Idame of New Registered Address: Enter Florida street address Enter Florida street address	

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
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fective date, if other the neffective date is listed, the	date must be specific and o	annot be prior to dat	of filing or more than	90 days after filing) g.) Pursuant to 60.	5.02
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	Signature of a m	ember or authorized	representative of a mer	nher		ŗ
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Robert E. Messi	ick Eco					

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Typed or printed name of signee

Filing Fee: \$25.00