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	(Requestor's Name)	
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	(City/State/Zip/Phone #)	
PICK-U	P WAIT M	AIL
	(Business Entity Name)	
<u> </u>	(Document Number)	
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## **COVER LETTER**

TO:	Registration Se Division of Cor			
e i in ir	Bayshore R	tedevelopment Group LLC		
SORTE	CT:		ited Liability Company	
The encl	losed Anicles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	cturn all correspo	ndence concerning this matter	to the following:	
		Rebecca Maddox		
			Name of Person	
		Bayshore Redevelopment	LLC	
			Firm/Company	
		1350 Jewel Box Ave		
			Address	<del></del>
		Naples, FL 34102		
			City/State and Zip Code	
		mehutchins6530@gmail.co		
		E-mail address: (	to be used for future annual report notifi	cation)
For furth	ner information c	oncerning this matter, please ca	all:	
Rebecca	a Maddox		239 774-3038 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclose	d is a check for th	ne following amount:		
<b>■</b> \$25.	00 Filing 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 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

Bayshore Redevelopment Group L				
(Name of the Limi	ted Liability Comp (A Florida Limited	any as it now appears on our record Liability Company)	<u>ls.</u> )	
The Articles of Organization for this Limited L	iability Company	were filed on August 21, 2017	and assigned	
Florida document number L17000178685			7.0	
This amendment is submitted to amend the foll	owing:		SEP TO MI	
A. If amending name, enter the new name of	f the limited lial	oility company here:	TO THE	
			三口	
The new name must be distinguishable and contain the v	vords "Limited Liah	ility Company," the designation "LLC	" or the abbreviation [L.L.C."	
Enter new principal offices address, if applie	able:	1350 Jewel Box Ave	<u> </u>	
(Principal office address MUST BE A STREE	ET ADDRESS)	Naples, FL 34102		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Naples, FL 34102		
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:  New Registered Office Address:		re: dox		
	Naples	, Fl	orida 34102	
		City	Zip 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.

Af 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	Rebecca Maddox		<b></b>
	· · · · · · · · · · · · · · · · · · ·		□ Add
			☐ Remove
		1350 Jewel Box Ave, Naples, FL 34102	
MGR	Diane Sullivan		_
		2570 P	
		3570 Bayshore Dr Suite 103, Naples, FL 34112	■ Remove
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<u>te:</u>  ft	he date inserted in this? 's effective date on the	block does not i	meet the applic	able statutory i	iling requirement	s. this date will not be listed
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he 90	th day after the re	cord is filed.			4, 4. 12.	
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Typed or printed name of signee

Filing Fee: \$25.00