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COVER LETTER

	gistration Sec ision of Corp			
SUBJECT:		n Naples, LLC		
SOBJECT.		Name of Limi	ited Liability Company	
The enclosed	d Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return	ı all correspoi	idence concerning this matter	to the following:	
		Brad Dancer		
			Name of Person	
		MH Holdings of Naples, L	LC	i
			Firm/Company	
		2051 Trade Center Way		
			Address	
		Naples, FL. 34109		
		bdancer@massageheights.co	City/State and Zip Code	
			to be used for future annual report notific	ration)
For further is	nformation co	ncerning this matter, please ca	all:	
Brad Dancer	r		239 571-1091 at ()	
	Name of	Person		Telephone Number
Enclosed is	a check for the	e following amount:		
■ \$25,00 F	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)

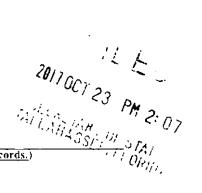
MAILING ADDRESS:

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



MH of North Naples, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liab		10-19-17	and assigned
Florida document number L17000216518			
This amendment is submitted to amend the follow	ing:		
A. If amending name, enter the new name of the	ne limited liability company	<u>here</u> :	
The new name must be distinguishable and contain the word	Is "Limited Liability Company," the	e designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicab	le:		
(Principal office address MUST BE A STREET	ADDRESS)		
(Mailing address MAY BE A POST OFFICE BO B. If amending the registered agent and/or registered agent and/or the new registered offic Name of New Registered Agent:	registered office address	on our records, <u>enter</u>	
			
New Registered Office Address:	Enter F	lorida street address	:
	City	. Florida	Zin Code
New Registered Agent's Signature, if changing Reg			ng con
I hereby accept the appointment as registered a provisions of all statutes relative to the proper accept the obligations of my position as registe being filed to merely reflect a change in the region company has been notified in writing of this change in the change in the region.	agent and agree to act in thi and complete performance ared agent as provided for in distered office address, I her	of my duties, and I am fo Chapter 605, F.S. Or,	amiliar with and if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	MH Holding Company, LLC	2051 Trade Center Way	Add
		Naples, FL. 34109	Remove
			☐ Change
MGR	MH Holdings of Naples, LLC	2051 Trade Center Way	
		Naples, FL. 34109	□ Remove
			□ Change
			201 POCT 200ve
			Change C
			□ Remove
		<u> </u>	☐ Change
			
		**	☐ Remove
			□ Change
		•	Remove
			☐ Change

	
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Effective date, if other than the date of filing (If an effective date is listed, the date must be specific and	g:(optional) I cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (
Note: If the date inserted in this block does not n document's effective date on the Department of S	nect the applicable statutory filing requirements, this date will not be listed as the
document seriective date on the Department of S	Auto 3 records.
the record specifies a delayed effective d) The 90th day after the record is filed.	date, but not an effective time, at 12:01 a.m. on the earlier of:
12 /22 /2. 17	
Dated	·
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00