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JUL 1 5 2019 S. YOUNG

## **COVER LETTER**

Division of	on Section f Corporations		ė.
SUBJECT:(	6231 Estero,	LLC	
SUBJECT:	Name of	Limited Liability Company	
The enclosed Articl	les of Amendment and fee(s) are	submitted for filing.	
Please return all cor	rrespondence concerning this m	atter to the following:	
	Tina	Sweetman Name of Person	
	PQ (	Unites Inc.	
	95 D	a)/ph/il Roll Address	
	Sristal,	City/State and Zip Code	10
	Sweet E-mail add	man a pacontro ress: (to be used for future annual re	port notification)
For further informa	ation concerning this matter, ple	ase call:	
Douglas	Schumann Name of Person	at ( <u>&amp;6.0</u> ) <u>&amp;</u> Area Code	39 - 250]  Daytime Telephone Number
Enclosed is a check	k for the following amount:		
\$25.00 Filing I	Fee S30.00 Filing Fee & Certificate of State		Certificate of Status &

### 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

(Name of the Limited Liability (	Company as it now appears on our records.) imited Liability Company)
	npany were filed on November 9, 2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	ed liability company here:
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	· \
(Principal office address MUST BE A STREET ADDRES	<u>(SS)</u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>
_	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	ered office address on our records, enter the name of the ess here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered	Agent:
I hereby accept the appointment as registered agent an	nd agree to act in this capacity. I further agree to comply with

If Changing Registered Agent, Signature of New Registered Agent

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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being addor removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
	Tina Sweetman	Bristol, CT 06010	
		Bristol, CT 06010	Remove
			Change
	Douglas D. Schuma	Naples, FL. 34102	🗖 🖍 dd
		Naples, FL. 34102	Remove
			Change
		<u>.</u>	🗆 Add
			□ Remove
			Change
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ian effe <u>Note:</u> I	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.
ated_	June 28 . 2019.
	Signature of a member or authorized representative of a member
	ling Sweetman

Page 3 of 3

Filing Fee: \$25.00