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2024 MAR 20 PM 2: 16 SECRETARY OF STATE

## **COVER LETTER**

	Registration Section Division of Corporations					
CUD IDC	FÖWLER REALTY, LLC					
SUBJEC		Limited Liability Company				
The enclo	The enclosed Articles of Amendment and fee(s) are submitted for filing.					
Please re	turn all correspondence concerning this mat	ter to the following:				
	RAYMOND CANNAT	`A				
		Name of Person				
		Firm/Company				
	3105 FOWLER STREE	ET				
		Address				
•	FORT MYERS FLORIDA 33901					
•	RAYCANNATAI@GM	City/State and Zip Code IAIL.COM				
	E-mail addres	ss: (to be used for future annual report notification)				
For furthe	er information concerning this matter, pleas	e call:				
RAYMO	ND CANNATA	239 672-3892 at ( )				
	Name of Person	Area Code Daytime Telephone Number				
Enclosed	is a check for the following amount:					
■ \$25.0	00 Filing Fee \$\sum \text{\$30.00 Filing Fee & Certificate of Status}\$	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)  Street Address:				
Mailing Address: Registration Section Division of Corporations		Street Address:				
		Registration Section  Division of Corporations				
	P.O. Box 6327	The Centre of Tallahassee				
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FOWLER REALTY LLC		
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on ou liability Company)	r records.)
The Articles of Organization for this Limited Liability Company  Florida document number	were filed on12/5/201	7 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designati	on "LLC" or the abbreviation "L.L.C."
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)		····
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records	, enter the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	et address
		, Florida Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
hereby accept the appointment as registered agent and agroporovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my di provided for in Chapte	ties, and I am familiae with the discrete is a referred to the state of the state o

If Changing Registered Agent, Signature of New Registered

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>	<u>Address</u>	Type of Action
MGR	RAYMOND CANNATA	3105 FOWLER STREET	
		FORT MYERS FLORIDA 33901	□Remove
			☐ Change
			□Add
			Remove
			□Change
			□Add
			□Remove
		<del></del>	□Change
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			□Remove
			□Change
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			SECRETARY OF STATE
			Remove
			□Change

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an et	tive date, if other than the date of filing Tective date is listed, the date must be specific and	l cannot be prior to date	e of filing or more than	(optional) 90 days after filing	;) Pursuant to	605.020
iote:	If the date inserted in this block does not nent's effective date on the Department of S	neet the applicable s	tatutory filing require	ements, this date	will not be	:∰ted :
ocur	nent's effective date on the Department of S	nate's records.			- CF:	)24 MAR
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	rd specifies a delayed effective date, but not	an effective time, a	t 12:01 a.m. on the ea	arner of: (b) Th	he 90th day	er th
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reco	MARCH 18	, 2024			OF STATE SEE, FL	PM 2: 17
reco d is f	MARCH 18	. 2024			OF STATE SEE, FL	PM 2: 17
reco d is f	MARCHIN (one		representative of a men	nber	OF STATE	PM 2: 17

Filing Fee: \$25.00