118000001302

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	<u> </u>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	-





600307534816

01/11/19--01023--006 **60.00

18 JAH 2♥ PH 2: 49

JAN 29 2016 Y SULKER



January 12, 2018

WESTON FINN 19910 CHAPEL TRACE ESTERO, FL 33928

SUBJECT: PALMARIUM PORTFOLIO, L.L.C.

Ref. Number: L18000001302

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P08000029618.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 318A00000799

RECEIVED
JAN 29 2018

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PALMARIUM PORTFOLIO, L.L.C. (Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	y were filed on 1/2/2018	and assigned
This amendment is submitted to amend the following:	•	
A. If amending name, enter the new name of the limited lial		
MONARY, L. L.C. WITH THE "K" REPLECTED	BACKWARDS "X" MONARY	C ESTATES L.L.C
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	19910 CHAPEL TRACE	
(Principal office address MUST BE A STREET ADDRESS)	ESTERO, FL 33988	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	19910 CHAPEL TRACE ESTERO, FL 33928	
		<u> </u>
		<u>.</u> œ
B. If amending the registered agent and/or registered oregistered agent and/or the new registered office address he		ter the nants of the new
registered agent and/or the new registered office address ne	<u></u> .	(S) (D) (S)
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
	Enter Florida street address	9
	, Florida	
	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.

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			
			☐ Remove
			Change
			Add
			□ Remove
			☐ Change
			□ Remove
			□ Change
			18
			S □ Reifiove
		<u> </u>	Contract Change
			PH Change 5
			☐ Remove
			☐ Change
		-	Remove

	-
	18
	P P
	22: 🚅
	(optional) ⊊∵ • • • • • • • • • • • • • • • • • •
Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to date of filing or Note: If the date inserted in this block does not meet the applicable statutory fil document's effective date on the Department of State's records.	more than 90 days after filing.) Pursuant to 605.02
ne record specifies a delayed effective date, but not an effective The 90th day after the record is filed.	e time, at 12:01 a.m. on the earlier
Dated JANUARY 8TH 2018	
Signature of a member or authorized representati	ive of a member

Page 3 of 3

Filing Fee: \$25.00