

L18 0000 17495

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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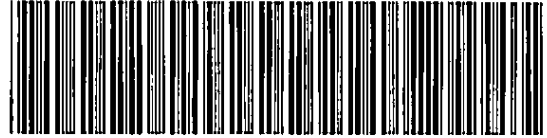
(Business Entity Name)

(Document Number)

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2020 JUL 28 AM 7:04

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

SEP 19 2020

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Capital Trust Equity Partners, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

John Leonard
Name of Person
Capital Trust Equity Partners LLC
Firm/Company
6300 Pelican Bay Blvd #204
Address
Naples FL 34108
City/State and Zip Code
jleonard1029@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Leonard at (239) 777-8990
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$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:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Capital Trust Equity Partners 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 Liability Company were filed on 1-19-2018 and signed
Florida document number L18000017495

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

6300 Pelican Bay Blvd #204
Naples FL 34108

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

6300 Pelican Bay Blvd #204
Naples FL 34108

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Attn: John Leonard

New Registered Office Address:

same 6300 Pelican Bay Blvd 204
Enter Florida street address
1 Naples, Florida FL 34108
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

John M. Leonard
John M. Leonard

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>	<u>Type of Action</u>
<u>mGR</u>	<u>Tiffany Webb</u>	<u>c/o Berkshire Hathaway</u>	<input type="checkbox"/> Add
		<u>1800 N. Clayborn Ave</u>	<input checked="" type="checkbox"/> Remove
		<u>Chi IL 60618</u>	<input type="checkbox"/> Change
<u>AmBR</u>	<u>Steven F. Betteski</u>	<u>4128 Hohman Ave</u>	<input type="checkbox"/> Add
		<u>Hammound IN 45327</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>mGR</u>	<u>John M. Leone</u>	<u>6300 Pelican Bay Blvd</u>	<input checked="" type="checkbox"/> Add
		<u>#204</u>	
		<u>Naples FL 34108</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 7-27, 2020

New Mgr.

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

John M. Leonard
Typed or printed name of signee

Existing mgr.

Tuffy Webb

Tiffany Webb