Division of Corporations 8/21/23, 1.49 PM

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> > (((H23000289874 3)))



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To:	
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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CONRGY, CONRGY & DURANT, P.A.

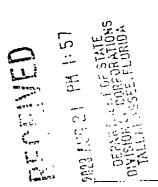
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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Help

COVER LETTER

	ion Section of Corporations		*
Hand SUBJECT:	Isome Gypsy LLC		
2000ECT;	Name of Lin	mited Liability Company	
The enclosed Artic	les of Amendment and fee(s) are su	bmitted for filing.	
Please return all co	rrespondence concerning this matter	r to the following:	
	Michael A. Durant		
		Name of Person	
	Conroy, Conroy & Duran	n, P.A.	
		Firm/Company	
	2210 Vanderbilt Beach Re	oad. Suite 1201	
		Addross	
	Naples, FL 34109		
	filings@naplespropertylaw	City/State and Zip Code	
		(to be used for future annual report not	dication)
or further informa	ion concerning this matter, please o	rall:	
Samantha MacLeo	i	239 649-5200 at () Area Code Daytim	
Ň	ame of Person	Area Code Daytim	e Telephone Number
inclosed is a check	for the following amount:		
■ \$25.00 Filing F	Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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

Handsome Gypsy LLC			
(Name of the Lin	nited Liability Company as it now app (A Florida Limited Liability Company	cars on our records.)	
The Articles of Organization for this Limited Florida document number £18000067413			_ and assigned
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liability company	<u>hcre</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Company," the	e designation "LLC" or the obbre	viction "L.L.C."
Enter new principal offices address, if appli	icable:		
(Principal office address MUST BE A STRE	ETADDRESS)		
	4-1001+		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	<u> </u>		
3. If amending the registered agent and/or agent and/or the new registered office addragent and/or the new registered office addragent	registered office address on our	records, <u>enter the name و</u> پ	of the new register
Name of New Registered Agent:	Michael A. Durant		100
New Registered Office Address:	2210 Vanderbilt Beach Road, S		: .) : .)
	Enter Fi	lorida street address	
	Naples	, Florida 34109	
	City		Zip Code
icw Registered Agent's Signature, if changing	Registered Agent:		37

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 = Manager AMBR = Authorized Member

AMBR = Aut	horized Member		Type of Action
<u>Title</u>	Name	Address	
MGR	Gerald Alajajiar.		□Add
		1253 12th Avenue N., Naples, FL 34102	BRemove
			☐ Change
			□Add
			Change
MGR	Dayle D. Westever	1253-12th Avenue N., Naples, FL 34102	= \\dd
			⊡Remove
	Richard Everette Fromm	600 Neapolitan Avenue #159, Naples, FL 34102	■Add
MGR ————			□Remove
			□ Change
			□Remove
			Change
		,	/···nannnn289874

Effective date, if other than the date of filling: (aptional) (but more than 100 days after filling) Pursuant to 605 0207 (2) (aptional) (aptional) (but more than 100 days after filling) (aptional) (aptional) (but more than 100 days after filling requirements, this date will not be listed as the document's effective date on the Department of State's records. (aptional) (b) (c) (aptional) (aptional) (b) (c) (c) (d) (d) (d) (d) (d) (d	•	
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		Aug. 4 -21 2073
Signature of a member or authorized representative of a member	Dated .	
Signature of a member of authorized representative of a member	Dated .	
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