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SECRETARY OF STATE

AUG 1 5 2019 S. YOUNG

## **COVER LETTER**

TO: Registration S Division of Co	ection rporations		
KPG REA	ALTY, LLC		
30 <b>0</b> 000	Name of Lir	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sul	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Larry Yogel		
		Name of Person	
	2720 Crescent Ridge Rd	Firm/Company	<del></del>
	Minnetonka MN 55305	Address	
	LDY342@GMAIL.COM	City/State and Zip Code	
	E-mail address: (	to be used for future annual report notif	ication)
For further information of	concerning this matter, please c	all:	
Larry Yogel		610 213 6866 at ()	
Name e	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	he 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, F1. 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KPG Realty, LLC			
(Name of the Limite	d Liability Compa A Florida Limited	iny as it now appears on our records. Liability Company)	)
The Articles of Organization for this Limited Liability Company Florida document number <u>L18000158402</u> .		were filed on June 28, 2018	and assigned
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
Crescent General, LLC			
The new name must be distinguishable and contain the wo	ords "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ıble:		
Principal office address MUST BE A STREE		2145 Canna Way	₹% <del>+</del>
,		Naples, FL 34105	
		<del></del>	<b>最高</b> 市
Enter now multing address if applicable			12 12 1888
Enter new mailing address, if applicable:		2145 Canna Way	
Mailing address MAY BE A POST OFFICE I	<u>50A)</u>	Naples FL 34105	
D. If		or ii	I. ~
B. If amending the registered agent and/oregistered agent and/or the new registered off			enter the name of the n
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A		
		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 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 $AMBR = A$	lanager authorized Member		
<u>Title</u>	Name	Address	Type of Action
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ive date, if other than the	e date of filing:		(optional)
If the date inserted in this b	st be specific and cannot be prictorial dock does not meet the application of State's record-	cable statutory filing requir	(optional) 90 days after filing.) Pursuant to 60 rements, this date will not be list
ord specifies a delaye 90th day after the red	d effective date, but n cord is filed.	ot an effective time, a	at 12:01 a.m. on the earli
August 5	2019	·	
	/		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00