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Tc:

Division of Corporations

Fax Number : (350)617-6383

From:

Account Name : PAVESE LAW FIRM

Account Number : I20130000057 : (239)334-2195 Phone

Fax Number : (239)332-2243

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CATLIN PAYNE PROPERTIES, LLC

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COVER LETTER

TO: Registration Section
Division of Corporations

Catlin Pa	yue Properties, LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Charles Bryan Capps		
		Name of Person	
	Pavese Law Firm		
	***************************************	Firm/Company	
	P. O. Box 1507		
		Address	
	Fort Myers, FL 33902-150	7	
		City/State and Zip Code	<u> </u>
	deirdrecatlin@gmail.com		
	E-mail address: (to be used for future annual report noti	fication)
For further information of	concerning this matter, please co	all:	
Charles Bryan Capps		239 336-6219 at ()	
Name (of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	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 Address:

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

H10000 295003

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Catlin Payne Properties,				
(Name of the Lim	ited Liability Com (A Florida Limite	pany as it now appears of d Liability Company)	n our records.)	
The Articles of Organization for this Limited I Florida document numberL18000195879	Liability Compar	ny were filed on Aug	nust 15, 2018	and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name N/A	- "			
The new name must be distinguishable and contain the Enter new principal offices address, if appli		bility Company," the desi	gnation "LLC" or the	abbreviation "L.L.C."
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>		· · · · · · · · · · · · · · · · · · ·	<i>Q</i> 3
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A		2000 AUS 21
B. If amending the registered agent and/or agent and/or the new registered office addr		e address on our rec	ords, <u>enter the n</u> a	me of the New registered
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A	Enter Floride	street address	
	N/A		, Florida [√A
•		City	, 1/1/1/44 _	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

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Hamending 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>	Address	Type of Action
AMBR	Catlin Properties, L.L.C.	4447 Camino Real Way	🗆 Add
		Fort Myers, FL 33966	■ R em ove
			□Change
AMBR	Jaren Catlin & Deirdre Catlin, as Husband and Wife	825 Cypress Lake Circle	= Add
		Fort Myers, FL 33919	□Remove
			Change
			□Remove
			Change
			□ Add
			□Remove
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			OAdd
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			□Change

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cticctiv	e date is listed, i	the date must be speci	ilic and cannot be pro	or to gate of titing o	r more than 50 days s	ifter filing.) Pursuant to this date will not be	605.02 listed
iment's	effective dat	te on the Departmen	nt of State's record	s.			
ord spe filed.	cifics a delay	ed effective date, b	ut not an effective	time, at 12:01 a.r	n. on the earlier of	(b) The 90th day	after t
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Filing Fee: \$25.00

Typed or printed name of signee