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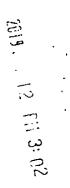
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COVER LETTER

Div	ision of Corp	orations		
SUBJECT:	Guy Friday	LLC		
SOBJECT.		Name of Lim	ited Liability Company	
The enclosed	l Articles of A	amendment and fee(s) are sub-	mitted for filing,	
Please return	all correspon	dence concerning this matter	to the following:	
		Leland Brinkman		
			Name of Person	
		Guy Friday LLC		
			Firm/Company	
		2181 Corporation Blvd		
			Address	
		Naples, FL 34109		
		-	City/State and Zip Code	
		LELANDJAMESBRINKM	•	
		E-mail address: ()	to be used for future annual report i	notification)
For further in	nformation co	ncerning this matter, please ca	all:	
Leland Brinl	kman		239 465-3635	5
	Name of	Person		time Telephone Number
Enclosed is a	check for the	e following amount:		
■ \$25.00 F	iling 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:

TO:

Registration Section

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, FL 32301

ARTICLES OF AMENDMENT TOARTICLES OF ORGANIZATION

10 S. O. Guy Friday, 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 01/04/2019 and assigned Florida document number L19000007001 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 "LLC" or the abbreviation "LLC." 2181 Corporation Blvd Enter new principal offices address, if applicable: Naples, FL 34109 (Principal office address MUST BE A STREET ADDRESS) 2181 Corporation Blvd Enter new mailing address, if applicable: Naples, FL 34109 (Mailing address MAY BE A POST OFFICE BOX) 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: Leland Brinkman Name of New Registered Agent: 2181 Corporation Blvd New Registered Office Address:

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.

City

Naples

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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>	Address	Type of Action
MGR	Michael Brinkman	5049 Mahogany Ridge Dr	C 144
		Naples, FL 34119	Add
			■ Remove
			☐ Change
			Add
		·	☐ Remove
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Effective date, if the date	is listed, the date mu	ust be specific and lock does not m	cannot be prior t neet the applica	o date of filing o	r more than 90 da	(optional) ys after filing.) Pur its, this date will	suant to 605.0207 (2 not be listed as th
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document's effect	y after the re	cord is filed	2019	z. /	e time, at 12	2:01 a.m. on	the earlier of:

Page 3 of 3

Filing Fee: \$25.00