L19000144318

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
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| Special Instructions to Filing Officer: |
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COVER LETTER

| то: | Registration Sec Division of Corp | | | | |
|---------------|---|---|--|---|--|
| | | oal Group LLC | | | |
| SUBJEC | Name of Limited Liability Company | | | | |
| The encl | osed Articles of . | Amendment and fee(s) are sub | mitted for filing. | | |
| | | ndence concerning this matter | | | |
| | | Ben Cottrell | | | |
| | | | Name of Person | | |
| | | Cottrell Tax & Accounting | ; | | |
| | | | Firm/Company | - | |
| | | 5147 Castello Drive | | | |
| | | | Address | | |
| | | Naples, Florida 34103 | | | |
| | | | City/State and Zip Code | 292 | |
| | | beottrell@cottrelltax.com | to be used for future annual report notification) | | |
| For furtl | ner information c | oncerning this matter, please e. | | 100 UN | |
| Ben Cot | trell | | 239 449-4881 at () | - And | |
| | Name o | f Person | Area Code Daytime Telephone Nu | mber <u>cn</u> | |
| Enclosed | d is a check for th | ne following amount: | | | |
| ■ \$25 | .00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | Certified Copy Cert (additional copy is enclosed) Cert | 00 Filing Fee, atticate of Status & iffied Copy tional copy is enclosed) | |
| | Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, I | Section orporations 7 | Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Sui | ite 810 | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Naples Global Group LLC | cany as it now appears on our records. | |
|--|---|------------------------------|
| (A Florida Limited (A Florida Limited) | pany as it now appears on our records.) Liability Company) | |
| The Articles of Organization for this Limited Liability Companional document number L19000144318 | ny were filed on May 30, 2019 | and assigned |
| his amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited lia | ability company here: | |
| N/A | | |
| he new name must be distinguishable and contain the words "Limited Lia | bility Company," the designation "LLC" | or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | N/A | |
| Principal office address MUST BE A STREET ADDRESS) | | 7 73 |
| | | |
| Enter new mailing address, if applicable: | N/A | |
| Mailing address MAY BE A POST OFFICE BOX) | | <u> </u> |
| | | |
| B. If amending the registered agent and/or registered offic agent and/or the new registered office address here: Name of New Registered Agent: N/A | e address on our records, <u>enter t</u> | he name of the new regist |
| New Registered Office Address: | Enter Florida street uddress | |
| | . Flo | rida |
| - | City | ridaZip 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 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 | Branimir Ivanov Brankov | 1777 Danford Street, Naples, Florida 34112 | = Add |
| | | | □Remove |
| | | | □Change |
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| | | | □Remove |
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| | | N/A | | | | <u>.</u> | _ |
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Filing Fee: \$25.00