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| - (Re | equestor's Name) | |
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| Certified Copies | _ Certificate: | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only

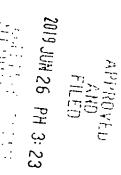


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COVER LETTER

| TO: Registration Se Division of Cor | | | | |
|--|---|---|------------------|----------------|
| | ehigh Acres-Ray St, LLC | | | |
| SUBJECT: | Name of Limit | ed Liability Company | | |
| The enclosed Articles of | Amendment and fee(s) are subn | nitted for filing. | | |
| | ondence concerning this matter to | | | |
| r lease retuin an concespe | with the contenting of the contention | Ç | | |
| | Bruce 1. Wiener | | | |
| | | Name of Person | | 2019 |
| | Nelson Mullins Broad and G | Cassel | | |
| | | Firm/Company | | FIL 26 |
| | | AND FILED 2019 JUN 26 PH 3: 24 | | |
| | | Address | ို့် ငှု | |
| | Tallahassee, FL 32301 | | | 24 |
| | | City/State and Zip Code | | |
| | E-mail address: (t | o be used for future annual report notific | cation) | |
| For further information | concerning this matter, please ca | 11: | | |
| Bruce I. Wiener | | 850 681-6810 | | |
| Name | of Person | Area Code Daytime | Telephone Number | |
| Enclosed is a check for | the following amount: | | | |
| S25.00 Filing Fee | S30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certified | te of Status & |
| | LING ADDRESS: | STREET/COURIE Registration Section | | |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Palmetto Lehigh Acres-Ray St, LLC | | |
|--|---|---------------------------------------|
| (<u>Name of the Limited Lial</u> (A Floi | hility Company as it now appears on our records.) rida Limited Liability Company) | |
| The Articles of Organization for this Limited Liability Florida document number L19000146580 | y Company were filed on June 3, 2019 | and assigned |
| This amendment is submitted to amend the following | ; | |
| A. If amending name, enter the new name of the l | imited liability company here: | 2019 |
| Palmetto Lehigh Acres-Ray Ave., LLC | <u> </u> | <u> </u> |
| The new name must be distinguishable and contain the words "I | Limited Liability Company," the designation "LLC" or the | he abbreviation "L.C." |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET AD | DRESS) | = = = = = = = = = = = = = = = = = = = |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| B. If amending the registered agent and/or registered agent and/or the new registered office a | | oter the name of the new |
| Name of New Registered Agent: | | |
| New Registered Office Address: | Enter Florida street address | |
| | , Florid | a |
| | 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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| ffective date, if other than than effective date is listed, the date is | uet be execific at | ed cannot be prie | or to date of filir | ng or more than 90 | (optional) days after filing | z.) Pursuant | to 605.0 | 0207 |
| ocument's effective date on the | block does not Department of | State's record | icable statutor s. | y tiling requiren | ienis, inis date | ; win not t | JE HSIEI | u as |
| | | | | | | | | |
| e record specifies a delay The 90th day after the re | ed effective ecord is filed | date, but n I. | ot an effec | tive time, at | 12:01 a.m. | on the | earlie | er ol |
| June 26 | | 2019 | | entative of a memb | | | | |
| lated | | · | ' | | | | | |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00