

L19000161964

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

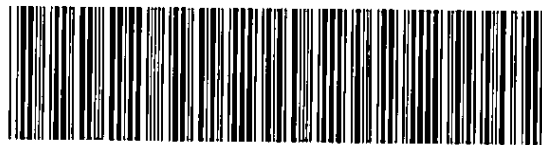
(Business Entity Name)

(Document Number)

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2021 OCT 19 AM 9:35

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10/20/21--01001--017 **25.00

Amend

OCT 20 2021

I ALBRITTON

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2021 OCT 19 PM 4:02

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LLC AMEND

1. ADG4 OF NAPLES, LLC

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ADG4 of Naples, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2021 OCT 19 AM 9:35

The Articles of Organization for this Limited Liability Company were filed on 06/19/2019 and assigned
Florida document number L19000161964.

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 "L.L.C."

Enter new principal offices address, if applicable:

975 6TH AVENUE SOUTH, SUITE 101

(Principal office address MUST BE A STREET ADDRESS)

NAPLES, FL 34102

Enter new mailing address, if applicable:

975 6TH AVENUE SOUTH, SUITE 101

(Mailing address MAY BE A POST OFFICE BOX)

NAPLES, FL 34102

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:

Name of New Registered Agent:

New Registered Office Address:

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 = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	FRAZITTA, ROBERT	157 FOREST AVE.	<input type="checkbox"/> Add
		HUDSON, MA 01749	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	A&F FAMILY INVESTORS, LLC	975 6TH AVENUE SOUTH, SUITE 101	<input checked="" type="checkbox"/> Add
		NAPLES, FL 34102	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) **Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated October 19 2021


Signature of a member or authorized

Typed or printed name of signee