Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CONROY, CONROY & DURANT, P.A.

Account Number : I20190000025

Phone : (239)649-5200

Fax Number : (239)649-8140

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

Email	Address:	 
Email	Address:	 

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 10551990 LLC

Certificate of Status	0
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## COVER LETTER

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	10551990. L	LC		
SUBJECT:			ed Liability Company	
			tood to a Clina	
Division of Corporations 10551990, LLC				
Please return	all correspor	ndence concerning this matter to	o the following:	
		J. Thoms Conroy, III		
			Name of Person	
		Conroy, Conroy & Durant.	P.A.	
			Firm/Company	
		2210 Vanderbilt Beach Roa	d, Suite 1201	
			Address	<del></del>
		Naples, FL 34109		
			City/State and Zip Code	-
		filings@naplespropertylaw.c	om	utification)
Tac Bookse is	·formation c			gricultory
		Olipotining that married produce as		
Sementhe M			1 10	No. 1 No. 1 No. 1
	Name o	f Person	Area Code Dayt	mo Telephone Number
Enclosed is	a check for th	ne following amount		
<b>\$25</b> .00 1	Piling F <b>œ</b>		Certified Copy	Certificate of Status & Certified Copy
	illing Addres		<u>Street Address:</u> Registration S	
	~	Corporations	Division of C	orporations
	D. Bex 632		The Centre of	f Tallahassee roe Street, Suite 810
Та	llahassee.	FL 32314	Tallahassee,	

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

10551990, LLC		<del></del>
(Name of the Limited Liability C	ompany as il now appears on ou nited Limbility Company)	t tecotify)
The Articles of Organization for this Limited Liability Com	pany were filed on August o.	and assigned
lorida document number L19000200018		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	55)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:  Name of New Registered Agent:	ffice address on our record	s, enter the name of the new registe
New Registered Office Address:		
New Registres Office 7808 Co.	Enter Florida str	et address
		Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered 4	Agent:	
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and com accept the obligations of my position as registered ages being filed to merely reflect a change in the registered company has been notified in writing of this change.	aplete performance of my d nt as provided for in Chapt	uties, and I am familiar with and er 605, F.S. Or, If this document is
		analyze of New Registered Agent
· · · · · · · · · · · · · · · · · · ·	III namaina Gemistered Avent 🦠	anamar ara <b>en Kevillettu Aye</b> ni

11/23/2020 11:06 2396498140

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address 64 260 10 186 in hided or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	J. Thomas Conroy, III	2210 Vanderbilt Beach Road, Suite 1201, Naples, FL	EAdd
			=Remove
			GChange
			□Add
			🗆 Romove
			Change
			□Add
			Remove
			Change
			□Add
			□Remove
			Change
			DAdd
			□Remove
			Change
<u> </u>			🗆 Add
			□ Remove
			Change

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amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary)
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an effe <u>ote:</u> I	re date, if other than the date of filing:
ecord is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the d.
ated _	November 23 . 2020.
	g and 3
	Signature of a member or authorized representative of a member
	J. Albert Smith, III, Manager

(((H20000403H24 3))H.