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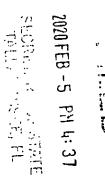
(Requestor's Name)
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COVER LETTER

TO:	Registration Division of C						
eum ma	'YT	A SPACE COAST PROPERTI	ES, LLC				
SUBJEC	-1: <u></u>	Name of Limited Liability Company					
The encl	osed Articles (of Amendment and fee(s) are su	bmitted for filing.				
Please re	turn all corres	pondence concerning this matte	r to the following:				
		Matthew J. Monaghan, E.	sq				
			Name of Person				
		Cantwell & Goldman, PA	<u>.</u>				
			Firm/Company				
		96 Willard Street, Stc. 30	2				
			Address				
		Cocoa, FL 32922					
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·			
	*	GARY @ S	VNBELT (AND MC) (to be used for future annual report no	MT. COM			
		E-mail address:	(to be used for future annual report no	tification)			
For furth	er information	concerning this matter, please	call:				
Matthew	J. Monaghan,	Esq	321 639-1320 x	107			
	Name	of Person	Area Code Dayti	me Telephone Number			
Enclosed	is a check for	the following amount:					
≘ \$25 .9	00 Filing 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)			
	<u>Mailing Addr</u>		Street Address:				
	Registration	Section Corporations	Registration S Division of Co				
	P.O. Box 63	•	The Centre of				
	Tallahassee		2415 N. Monr	oe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Company as it now appears on ou (A Florida Limited Liability Company)	r records.)
The Articles of Organization for this Limited I		9 and assigned
Florida document number L19000242111		
This amendment is submitted to amend the fol		2020 FI
A. If amending name, enter the new name of		5 5
The new name must be distinguishable and contain the	words "Limited Liability Company," the designati	on "LLC" or the abbreviation "LLC."
Enter new principal offices address, if appli		20 F 3
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u></u>	
B. If amending the registered agent and/or agent and/or the new registered office addre		, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	5150 TAMIAMI TRAIL NORTH	
	Enter Florida stre	et address
	Naples	, Florida ³⁴¹⁰³
	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 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

Title	<u>Name</u>	Address	Type of Action
MGR	William G. Allen	3129 SPRINGBANK LANE	□Add
		CHARLOTTE, NC 28226	■Remove
			Change
MGR	Sunbolt Southeast Management, LLC	5150 TAMIAMI TRAIL NORTH SUITE 403	🗟 Add
		NAPLES, FL 34103	Renneve
			Charles
		•	F. F
			□Change
			🗆 Add
			□Remove
			Change
			□Add
			□ Change
			🗀 Add
			🗔 Remove
			Change

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Effective date, if other than the date of filing:	(optional)
f an effective date is listed, the date must be specific and cannot be prior to da Note: If the date inserted in this block does not meet the applicable locument's effective date on the Department of State's records.	statutory filing requirements, this date will not be lis
record specifies a delayed effective date, but not an effective time, a d is filed.	at 12:01 a.m. on the earlier of: (b) The 90th day after
Dated JANUARY 30TH 2020.	
Will Sulland Signature of a member or authorized	i representative of a member

×