## 119000279 No8

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

Office Use Only



900337524209

12/06/19--01010--022 \*\*25.00

2019 DEC - 6 PM 3: 03
SECRETARY OF STATE
TALLAHASSEE FI

O SIMMONS

## **COVER LETTER**

. .

| SHRIEC   |   | Amendment and fee(s) are submitted for filing.  Amendment and fee(s) are submitted for filing.  Indence concerning this matter to the following:    Karen Crane  |                                   |   |  |
|--|---|--|-----------------------------------|---|--|
|  |   |  |                                   |   |  |
| The enclo  | Division of Corporations    5231 Gulf of Mexico Dr., Unit 307 LLC |  |                                   |   |  |
|  |   |  | _                                 |   |  |
|  |   | Karen Crane  |                                   |   |  |
|  |   |  | Name of Person                    | ···   |  |
| Division of Corporations  S231 Gulf of Mexico Dr., Unit 307 LLC  Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  Karen Crane  Name of Person  Santen & Hughes  Firms/Company  600 Vine Street, Suite 2700  Address  Cincinnati, Ohio 45202  City/State and Zip Code  kwc@santen-hughes com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Karen Crane  Name of Person  Name of Person  S25.00 Filing Fee  S30.00 Filing Fee & Certified Copy (additional copy is enclosed)  Mailing Address:  Street Address: |   |  |                                   |   |  |
|  |   | <del></del>  | Firm/Company                      |   |  |
|  |   | of Amendment and fee(s) are submitted for filing.  spondence concerning this matter to the following:  Karen Crane  Name of Person  Santen & Hughes  Firm/Company  600 Vine Street, Suite 2700  Address  Cincinnati, Ohio 45202  City/State and Zip Code  kwc@santen-hughes.com  B-mail address: (to be used for future annual report notification) on concerning this matter, please call:  or the following amount:  ST 13           |                                   |   |  |
|  |   |  | Address                           | _ <del>.</del>  |  |
|  |   | Amendment and fee(s) are submitted for filing.  Amendment and fee(s) are submitted for filing.  Indence concerning this matter to the following:  Karen Crane  Name of Person  Santen & Hughes  Firm/Company  600 Vine Street, Suite 2700  Address  Cincinnati, Ohio 45202  City/State and Zip Code  kwc@santen-hughes com  E-mail address: (to be used for future annual report notification)  oncerning this matter, please call:  1 |                                   |   |  |
|  |   | <del> </del>   | City/State and Zip Code           | ing Fee & S60.00 Filing Fee. Copy Certificate of Status & Certified Copy (additional copy is enclosed)  Street Address: Registration Section Division of Corporations The Centre of Tallahassee |  |
|  |   |  |                                   |   |  |
|  |   | E-mail address: (  | to be used for future annual repo | ort notification)   |  |
| For furthe   | er information c  | oncerning this matter, please ca   | all:                              |   |  |
| Karen Crane  |   | ,  | 150                               |   |  |
|  | Name o  | f Person   |                                   | Daytime Telephone Number  |  |
| Enclosed   | is a check for the  | ne following amount:   |                                   |   |  |
| <b>■</b> \$25.0  | 00 Filing Fee   |  | Certified Copy                    | Certificate of Status & Certified Copy  |  |
| _  |   |  |                                   |   |  |
| ]  | Division of C   | Corporations   | Division o                        | f Corporations  |  |
|  | P.O. Box 632<br>Tallahassec.                                      |  |                                   |   |  |

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

5231 Gulf of Mexico Dr., Unit 307 LLC

| (Name of the Limited Liability Com  | npany as it now appears on our records.) ed Liability Company)              |  |  |
|---|---|--|--|
| (A Florida Limite   | ed Liability Company)   |  |  |
| The Articles of Organization for this Limited Liability Compa<br>Florida document number L19000279168   | ny were filed on November 8, 2019   | and assigned   |  |
| This amendment is submitted to amend the following:   |   |  |  |
| A. If amending name, enter the new name of the limited li   | ability company here:   |  |  |
| The new name must be distinguishable and contain the words "Limited Li  | ability Company," the designation "LLC" or                                  | the abbreviation "L.L.C."                            |  |
| Enter new principal offices address, if applicable:   |   |  |  |
| (Principal office address MUST BE A STREET ADDRESS)   |   | 2019<br>SEC  |  |
|   |   |  |  |
|   |   |  |  |
| Enter new mailing address, if applicable:   |   | \$ 6 in  |  |
| (Mailing address MAY BE A POST OFFICE BOX)  |   |  |  |
|   | ·   | FI 6   |  |
|   |   | an   |  |
| B. If amending the registered agent and/or registered office and/or the new registered office address here:   | ce address on our records, <u>enter the</u>                                 | name of the new registere                            |  |
| Name of New Registered Agent:   |   |  |  |
| <u> </u>  |   |  |  |
| New Registered Office Address:  | Enter Florida street address  |  |  |
|   | , Florida   |  |  |
|   | City  | Zip Code   |  |
| New Registered Agent's Signature, if changing Registered Age  | ent:  |  |  |
| I hereby accept the appointment as registered agent and a<br>provisions of all statutes relative to the proper and compl<br>accept the obligations of my position as registered agent<br>being filed to merely reflect a change in the registered off<br>company has been notified in writing of this change. | lete performance of my duties, and I<br>as provided for in Chapter 605, F.S | l am familiar with and<br>5. Or, if this document is |  |

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>                      | Address                                | Type of Action        |
|--------------|----------------------------------|--|-----------------------|
| MGR          | William F. Bradley, Trustee      | 24463 Graf Road, Sunman, Indiana 47041 | □Add                  |
|              |                                  |  | <b>=</b> Remove       |
|              |                                  |  | Change                |
| MGR          | William J. Bradley, Jr., Trustee | 24463 Graf Road, Sunman, Indiana 47041 | <b>=</b> Add          |
|              |                                  |  | □Remove               |
|              |                                  |  | □Change               |
|              |                                  |  | □Add                  |
|              |                                  | TALLAS                                 | Remove  STATE  Remove |
|              |                                  |  | S A Remove            |
|              |                                  |  | □Change               |
|              |                                  |  | □Add                  |
|              |                                  |  | □Remove               |
|              |                                  |  | Change                |
| <del></del>  |                                  |  | □Add                  |
|              |                                  |  | Remove                |
|              |                                  |  | □ Change              |

|  |                              | •                          |  |   | _                |
|--|------------------------------|----------------------------|--|---|------------------|
|  |                              |                            |  |   |                  |
|  |                              |                            |  |   | _                |
|  |                              |                            |  |   | _                |
|  |                              |                            | <del>-</del>                             |   | _                |
|  |                              |                            |  |   | _                |
|  |                              |                            |  |   | _                |
|  |                              |                            |  |   |                  |
|  |                              |                            |  |   | _                |
|  |                              |                            |  | 양 열                                       |                  |
|  |                              |                            |  | 2019 DEC                                  | ELECTRICAL CO.   |
|  |                              |                            | 3:                                       | 2.34                                      | 5                |
|  |                              |                            | 3  | 2年<br>2日 <b>2</b>                         |                  |
|  |                              |                            |  | m 100 4.                                  |                  |
|  |                              |                            |  | 平岩 3                                      | -                |
|  |                              |                            |  | <del></del>                               | _                |
|  |                              |                            |  |   | _                |
|  |                              |                            |  |   |                  |
| · · · · · · · · · · · · · · · · · · ·  |                              |                            |  |   | _                |
|  |                              |                            |  |   | _                |
|  |                              |                            |  |   |                  |
| fective date, if other than the date must be one effective date is listed, the date must be ote: If the date inserted in this block becament's effective date on the Dep | k does not meet the applic   | able statutory filing req  | an 90 days after filinuirements, this da | ig.) Pursuant to 60<br>te will not be lis | 05.020<br>sted a |
| record specifies a delayed effective is filed.   | date, but not an effective t | ime, at 12:01 a.m. on th   | e earlier of: (b)                        | The 90th day aft                          | ter the          |
| December 3  Charles S  | 2019                         |                            |  |   |                  |
| Chale  | M. Meye                      |                            |  |   |                  |
| - Court  | unature of a nomber or auth  | orized representative of a | nember                                   |   |                  |