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Division of Corporations

Florida Department of State

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From:

Account Name : LAW OFFICE OF CONRAD WILLKOMM, P.A.

Account Number : I20200000174 Phone : (239)262-5303 Fax Number : (239)262-6030

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MARCO'S DEVELOPMENT LLC

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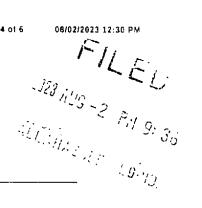
COVER LETTER

	ration Se on of Cor	ction porations		
SUBJECT:		velopment, LLC		
SUBJECT:		Name of Lin	nited Liability Company	
The enclosed A	rticles of a	Amendment and fee(s) are sub	omitted for filing.	
Please return all	l correspo	лdence concerning this matter	to the following:	
		Conrad Willkomm, Esq.		
			Name of Person	
		Law Office of Conrad Wi	likomm, P.A.	
			Firm/Company	
		3201 Tamiami Trail N, 2n	d Floor	
			Address	
		Naples, FL 34103		
			City/State and Zip Code	
		conrad@swfloridalaw.com		
		E-mail address: (to be used for future annual report no	otification)
For further infor	mation co	oncerning this matter, please c	all:	
Conrad Willkon	ານາກ		239 262-5303	
	Name of	Person	at () Area Code Dayti	me Telephone Number
Enclosed is a ch	eck for the	e following amount:		
■ \$25.00 Filir	ig 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)
	e Address tration S		Street Address: Registration S	ection
Divisi	on of Co	orporations	Division of Co	prporations
P.O. E	30x 6327	7	The Centre of	Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Marco's Development, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 01/22/2020 _____ and assigned Florida document number 1.20000015780 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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 Florido street address _, Florida <u>.__</u>_ City 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>	Name	Address	Type of Action
S	Weiwen Tang	10388 Spruce Pine Court	DAdd
		Fort Myers, FL 33913	
			□Change
			□Add
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			[]Change
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un effective date i	s listed, the date mu	ust be specific and	cannot be prior t	odate of filing or m	ore than 90 days after	r filing.) Pursuant to 605.02 is date will not be listed:
cument's effec	tive date on the I	Department of S	tate's records.	ore statutory from	g requirements, viii	a date with not be haved
ecord specifies is filed.	a delayed effecti	ve date, but not	an effective tin	ne, at 12:01 a.m.	on the earlier of: (b	b) The 90th day after th
ated	Jun 27, 20: *	23				
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		Signature of a m	nember or author	ized representative	of a member	-