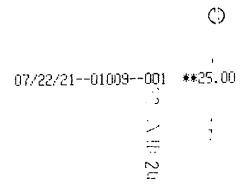
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COVER LETTER

TO:

TO: Registration Division of C	Section Corporations		
SUBJECT: DOM	nanus Development Name of Lim	+ Partners, LLC ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Picase return all corre	spondence concerning this matter	to the following:	
	Nicote Fa	Name of Person	
	Domanus	Development Dar- Firm/Company	thurs
	849 75	Ave. S. Ste. 203	5
	Naples, F	L 34102 City/State and Zip Code	
	iohn ad E-mail address: (OMANUS ANDUA. COT to be used for future annual report noti	fication)
For further informatio	n concerning this matter, please co	all:	
Nicola Nam	e of Person	at (<u>139</u>) <u>331 -</u> Area Code Daytim	RO78 C Telephone Number
Enclosed is a check fo	r the following amount:		
S25.00 Filing Fee S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Add</u> Registratio		Street Address: Registration Sec	
	f Corporations	Division of Cor	
P.O. Box 6 Tallahasse	327 e, FL 32314	The Centre of T 2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Partners, LLC	
ability Company)	
, ,	and assigned
ity company here:	
ty Company," the designation "LLC" or the	abbreviation "L.L.C."
	<u>.</u>
ldware on our records onter the na	uma of the new registers
idless on our records, enter the ha	ane of the new registered
	(1)
Enter Florida street address	rý -
, Florida	دني
City	Zip Code
	24
	, Florida

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Gina Domanus	1432 Vineyard Lane	□Add
		1432 Vineyard Lane Libertyville, 11 60048	XI Remove
			□Change
AMBR	Dariusz Szymanski	2622 Yarmouth Dr. Wallington, FL 33414	□Add
		Wallington, FL 33414	⊠ Remove
			□Change
			□Add
			□Remove
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If an effective	ate, if other than date is listed, the date	must be specific	e and cannot l	be prior to date	of filing or mor	e than 90 days af	ter filing.) Pursua	nt to 605.0207 (3
	e date inserted in this effective date on the				atutory filing	requirements, t	his date will no	t be listed as th
		f					[-	
e record spe	ecifies a delayed effe	ctive date, bu	t not an effe	ctive time, a	12:01 а.т. ог	the earlier of:	(b) The 90th (lay after the
rd is filed.							. ,	j
	1 -							
Dated 16	July p		<u> </u>	21.				
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	1 1 <u>1</u> 1	71 1	/	_				
-	Sohn	'Signature	of a member	or authorized	representative o	f a member		_
-	1 1 <u>1</u> 1	Signature	of a member	or authorized	representative o	f a member		