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COVER LETTER

Registration Section

TO:

Division of Co	Division of Corporations		
	OUSING, LLC		
SUBJECT:	Name of Li	nited Liability Company	
The enclosed Articles of	f Amendment and fec(s) are su	bmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
	Scott W. Duval		
		Name of Person	
	Hahn Loeser & Parks LL	Р	
		Firm/Company	
	2400 First Street, Suite 30	00	
		Address	
	Fort Myers, FL 33901		
		City/State and Zip Code	
	sduval@hahnlaw.com		
	E-mail address:	to be used for future annual report no	tification)
For further information of	concerning this matter, please of	all:	
Scott W. Duval		239 337-6728 at ()	
Name o	of Person	Area Code Dayti	me Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	S30.00 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)
Mailing Address Registration S	Section	Street Address: Registration So	
Division of C P.O. Box 632	•	Division of Co The Centre of	
	Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IGC HOUSING, LLC				
(Name of the Limi	ted Liability Compa (A Florida Limited	ns as it now appears on or Liability Company)	ir reco <u>rds.</u>)	
The Articles of Organization for this Limited L	iability Company	were filed on April 7, 2	2020	_ and assigned
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company here:		
34110 HOUSING, LLC				
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designat	on "LLC" or the abbrev	
Enter new principal offices address, if applic	ab ie :	1808 Imperial Golf Co	urse Blvd	020
(Principal office address MUST BE A STREET ADDR.		Naples, FL 34110		11
				2
Enter new mailing address, if applicable:				AH II
Mailing address MAY BE A POST OFFICE	BOX)	 		
B. If amending the registered agent and/or ragent and/or the new registered office address		address on our records	, enter the name of	the new registered
Name of New Registered Agent:	Hahn Loeser &	Parks LLP		
New Registered Office Address:	2400 First Stree	et, Suite 300		
		Enter Florida stre	et address	
	Fort Myers		Florida 33901	
		City		Lip 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 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
			□Add
			Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Add
		<u>-</u>	□Remove
			□Add
			□ Remove
			☐ Change
			□Add
			Remove
			□Change

Effective date, if other than the date of filing: [optional] [op		
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John D. Lee		Signal a member or authorized representative of a member
	John D	l. Lee

Filing Fee: \$25.00