## L20000 180853

(Requestor's Name)
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(City/State/Zip/Phone #)
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OCT 24 2020

## **COVER LETTER**

TO: Registration Se Division of Cor					
	e 132 LLC				
SUBJECT:	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Richard Blackwell				
		Name of Person			
	Ric Blackwell Law PA				
		Street Address:  Registration Section  Division of Corporations  The Centre of Tallahassee			
	10600 Chevrolet Way, Su	ite 212			
	In the following amount:    Corporations   Street Address:   Street Address:   Security   Securities   Street Address:   Security   Securities   Security   Security				
	Estero, FL 33928				
		City/State and Zip Code			
			State of the state		
For further information c			micationi		
Rie Blackwell					
Name o	n' Person	Area Code Daytir	ne Telephone Number		
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy		
<u>Mailing Addres</u> Registration :			ection		
Division of Corporations		• • • • • • • • • • • • • • • • • • •			
P.O. Box 632					
Tallahassee,	にし ラムシキ件	Z410 IN. MONTO	ac aucci, auno o iv		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

7), c. 11, 71H179

If Changing Registered Agent, Signature of New Registered Agent

Matecumbe 132 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 v	vere filed on 7-6-2020	and assigned
Florida document number 1.20000180853	<u></u>	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	y Company," the designation	on "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 a agent and/or the new registered office address here:	ldress on our records	enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida strec	a address
		Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	verformance of my du rovided for in Chapte	ties, and I am familiar with and r 605, F.S. Or, if this document is

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	Daniel W. Sampson, Trustee of the	4701 Broadway Ave., W	□Add
	Paniel W. Sampson Living Trust Dated June 1, 2020	Estero, FL 33928	□Remove
			🗏 Change
MGR	Valerie Hietala	4701 Broadway Ave., W	□Add
		Estero, FL 33928	□Remove
			■ Change
			□Add
			□Remove
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ective date, if other than the date of filing:effective date is listed, the date must be specific and cannot be e: If the date inserted in this block does not meet the aument's effective date on the Department of State's recomment.	ipplicable statutoi	ig or more than 90 day y filing requiremen	(option) es after tili ts, this da	<b>d)</b> ng.) Pursuant ate will not l	to 605,020 be listed a
cord specifies a delayed effective date, but not an effect stiled.	tive time, at 12:01	a.m. on the earlier	of: (b)	The 90th da	y after the
ed September 8 2020	·				
Signature of a member or	r authorized renrese	ntative of a member.			

Filing Fee: \$25.00