L2 000 221 267

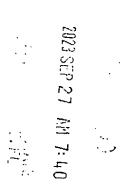
(Requestor's Name)
(Address)
(Madiess)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

Office Use Only



700416347867

03/27/28--01010--021 **25.00



c/ 10/9/2023

COVER LETTER

TC: Registration Section Division of Corporations
SUBJECT: 26311 CAPE VERDE LANE, 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:
JACQUELYN AUEN Name of Person
BONAQUIST ALLEN Firm/Company
4099 TAMIAMI TRAIL N. STE 308 Address
NAPLES, FLORIDA 34103 City/State and Zip Code
MAPLES, FLORIDA 34103 City/State and Zip Code JACY BONAQUISTALLENLAW. COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
BONAQUIST AWEN at (239) 276-7/27 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Sol

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LEDAT INNE

110 2023 SER 27

Zip Code

(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 $\frac{07/27/2020}{0.000}$ and assigned
Florida document number <u>L20000221267</u> .
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, <u>enter the name of the new registere</u> agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address
Florido

New Registered Agent's Signature, if changing Registered Agent:

7/211

CADE

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.

City

If amending Authorizéd Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Au	thorized Member		
Title	<u>Name</u>	Address	Type of Action
MGR.	BRETT HEIER	5600 ZIP DRIVE	□Add
		SUITE 100	Remove
		FORT MYERS, FL. 33900	□Change
MGR	POSITANO HOLDING	257 OLD CHURCHMANNS R	D t ∕Add
	GROW, UC	NEW CASTLE, DE. 1972	Remove
			□Change
			🗆 Add
			Remove
			□Change
			□Add
			□Remove
			Change
			🗆 Add
			□Remove
			□ Change
			🗆 Add
			□Remove
			□Change

								——————————————————————————————————————
								— — — —
								— — —
		<u>.</u>						— — —
								<u> </u>
								<u> </u>
						-	_	<u> </u>
			<u> </u>					
		_						<u> </u>
						<u></u>		
 .			<u></u>					
	· .							
te is listed, the da ate inserted in t	te must be spec his block doe:	itic and cann s not meet t	the applicabl	date of filing of e statutory fi	r more than 90 ling requirer) davs after fili	ng.) Pursuant to	605.0207 listed as
ies a delayed el	fective date, b	out not an ei	ffective time	, at 12:01 a.i	n, on the ear	lier of: (b)	The 90th day	after the
8/31/6	923	al	- Igol		И			_
	/	z oya memb	per or authorize	ed representat	ive of a iñ einl	MT.		
1	ite is listed, the da late inserted in t fective date on Tes a delayed ef	ite is listed, the date must be spec late inserted in this block doe fective date on the Departme les a delayed effective date, b	Tective date on the Department of State Tective date on the Department of State Test a delayed effective date, but not an e	the is listed, the date must be specific and cannot be prior to clate inserted in this block does not meet the applicable fective date on the Department of State's records. Test a delayed effective date, but not an effective time Signature of a member of authorized the content of the cont	the is listed, the date must be specific and cannot be prior to date of filing of late inserted in this block does not meet the applicable statutory fifective date on the Department of State's records. Test a delayed effective date, but not an effective time, at 12:01 a.i. Signature of a member of authorized representated the content of the conten	ste is listed, the date must be specific and cannot be prior to date of filing or more than 90 late inserted in this block does not meet the applicable statutory filing requirer fective date on the Department of State's records. Test a delayed effective date, but not an effective time, at 12:01 a.m. on the ear Signature of a member of authorized representative o	ste is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing inserted in this block does not meet the applicable statutory filing requirements, this diffective date on the Department of State's records. Test a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) Signature of a member of authorized representative of a member JACQUELYN AUEN	ste is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to late inserted in this block does not meet the applicable statutory filing requirements, this date will not be fective date on the Department of State's records. The 90th day Signature of a member of authorized representative of a member of authorized representative of a member. JACQUELYN AUEN

ETT COT OR