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Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	
		6/6/21 TM

Office Use Only



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21 MAR 17 AM II: 01



4001 Tamiami Trail North, Suite 300 Naples, Florida 34103 T: 239 435.3535 | F: 239 435.1218

Writer's Email: mgrabinski@cyklawfirm.com

March 16, 2021

Via FedEx 7731 7608 2951

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

RE: Articles of Amendment to Articles of Organization of Shoppes at Dockside, LLC

Dear Sir or Madam:

Enclosed for filing is our Articles of Amendment to Articles of Organization of Shoppes at Dockside, LLC and our firm's check in the amount of \$25.00 for the filing fee.

If you have any questions, please contact the undersigned.

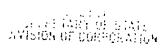
Sincerely,

Matthew L. Grabinski

Matthew J. Grahmski (mas)

cc: Bonnie Reams, via email at bonniegreams@outlook.com (w/enclosures)

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION AVISION OF CORPORATION



21 MAR 17 AM 11: 01

SHOPPES AT DOCKSIDE, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

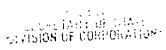
The Articles of Organization for this Limited Liability Comp.	any were filed on MARCH 1, 2	and assigned
Florida document number 1.21000100158	,	-
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	liability company here:	
The new name must be distinguishable and contain the words "Limited L	iability 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	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ice address on our records, <u>er</u>	nter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ad	kiress
		, Florida
	City	Zip 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 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>N</u> ame	Address 21 MAR 17 AH II:	01 Type of Action
MGR RENZO RENZI	RENZO RENZI	2324 VANDERBILT BEACH RD., #624	□Add
		NAPLES, FLORIDA 34109	Remove
			□Change
MGR BONNIE REAMS	BONNIE REAMS	2324 VANDERBILT BEACH RD., #624	≣Add
		NAPLES, FLORIDA 34109	□Remove
			□Change
MGR DAVID THORSE	DAVID THORSE	2324 VANDERBILT BEACH RD., #624	= Add
		NAPLES. FLORIDA 34109	□Remove
			Change
MGR PETER WOLVERTON	PETER WOLVERTON	2324 VANDERBILT BEACH RD., #624	
		NAPLES, FLORIDA 34109	□Remove
			Change
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	n, enter change(s) here: (Attach additional sheets liftuevessay) in ORAHOV
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	specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 does not meet the applicable statutory filing requirements, this date will not be listed:
ecord specifies a delayed effective dat s filed.	te, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after th
MARCH 16	2021
red	
1,1,1	
Sign	nature of a member or authorized representative of a member

Filing Fee: \$25.00