Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NAJMY THOMPSON, P.L.

Account Number : I20090000014 Phone : (941)907-3999 Fax Number : (941)840-5559

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

NAPLES ENCLAVE LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

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Help

COVER LETTER

TO: Registration S Division of Co		
CLUB TEACH.	ENCLAVE 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:
	Patrick Bryant	
		Name of Person
	Najmy Thompson, P.L.	
		Firm/Company
	1401 8th Ave W	
		Address
	Bradenton FL 34205	
		City/State and Zip Code
	cara@beachtobayliving.com	
	E-mail address: (to be used for future annual report notification)
For further information of	concerning this matter, please c	all:
David Gizys		941 7482216
Name o	of Person	Area Code Daytime Telephone Number
Enclosed is a check for t	he following amount:	
□ \$25,00 Filing Fee	S30.00 Filing Fcc & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Addre Registration		Street Address: Registration Section
Division of C		Division of Corporations
P.O. Box 632		The Centre of Tallahassee
Tallahassee,	rL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NAPLES ENCLAVE LLC			
(Name of the Limit	ed Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited L	•	were filed on 06/03/2021	and assigned
Florida document number L21000259775			
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of the limited liability company here:			
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	AUST BE A STREET ADDRESS) 102 48th St		
		Bradenton, FL 34205	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>		
B. If amending the registered agent and/or ragent and/or the new registered office address		address on our records, <u>enter the n</u>	ame of the new registered
Name of New Registered Agent:	Najmy Thomps	son, P.L.	
New Registered Office Address:	1401 8th Ave \		C2)
	Bradenton	Enter Florida street address, Florida	34205 F. S.
New Registered Agent's Signature, if changing I	Registered Agent:	City	7. 24 R. E. C.

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
			□Renюve
			□ Change
			□Add
			□Remove
			[]Change
			□Add
			□Remove
			[]Add
			□Remove
			Change
			□ Add
			□Remove
			Change
			DAdd
			□Remove
			□ Change

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Filing Fee: \$25.00