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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Maio Building and Land Development LL. C. Namelof 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:
Mirgan R. Bentley & Bentley & Son PA Sintley Ground Ich Kism PA Firm/Company 483 Do. Orange Ath., 3nd Fe Gradess Savajuta, FL 34236 City/State and Zip Code Mbentley & bak. Ich E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Murgan R. Buntley Eld. at (941) 556-9030 Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$\int_{\substack} \text{S25.00 Filing Fee} \substack} \text{S55.00 Filing Fee} \substack} \substack \substack \text{S60.00 Filing Fee}.
S25.00 Filing Fee S30.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) S50.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed)
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on Cotober 15, 201 and assigned Florida document number <u>Lâ1</u>000450.333 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, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address 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 decument 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>	<u>Address</u>	Type of Action
	Alan Maio	16743 Singlatary Rd Myakka City, FL 34251	□Add
		Myakka City, FL 34951	PRemove
			□Change
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Effective date, if other than the date of filing:	
If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records. The erecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day red is filed.	
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Signature of a member or authorized representative of a member	_
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Filing Fee: \$25.00