L21000532018

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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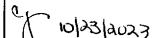
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COVER LETTER

Registration Section

TO:

Divi	ision of Cor _l	porations					
	12A 136 N	Chestnut St LLC					
SUBJECT:		Name of Lim	ited Liability Company				
The enclosed	Articles of	Amendment and fee(s) are sub-	mitted for filing.				
Please return	all correspon	ndence concerning this matter	to the following:				
		Luca Di Nunzio					
			Name of Person	 			
		Dorcey Law Firm					
Firm/Company 10181 Six Mile Cypress Pkwy, Suite C							
		Address					
		Fort Myers, FL 33966					
		support@dlfregisteredagent	City/State and Zip Code				
		.,	to be used for future annual report noti	fication)			
For further in	oformation co	oncerning this matter, please ca	all:				
Luca Di Nun	nzio		239 308-1073 at (
	Name of	Person	Area Code Daytim	e Telephone Number			
Enclosed is a	check for th	ne following amount:					
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	iling Addres gistration S		<u>Street Address:</u> Registration Se	ction			

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

DocuSign Envelope ID: B2DB5C2D-4FB4-44CF-B798-AE2AADE2300C AKTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

2023 OCT 16 AM 7:55

12A 136 N Chestnut St LLC			
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our recaliability Company)	ords.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000532018</u>	were filed on 12/20/2021	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "I	.L.C" 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 office a agent and/or the new registered office address here:	address on our records, <u>en</u> t	ter the name of the new register	
agent and/of the new registered office address nere.			
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.	Enter Florida street ada	dress	
	, Florida		
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agro- provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, provided for in Chapter 60	and I am familiar with and 15. F.S. Or, if this document is	

If Changing Registered Agent, Signature of New Registered Agent

DocuSign Envelope ID: B2DB5C2D-4FB4-44CF-B798-AE2AADE2300C II amending Authorized rerson(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	Roger O. Spool	7334 Acom Way	□Add
		Naples FL 34119	□Remove
			≅ Change
			□Add
			□ Change
			🗆 Add
			Remove
			□Change
			□Remove
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			□Remove
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			□ Change

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F ffective	e date, if other than the date of filing: (optional)
lf an effec <u>Note:</u> If	tive 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 605.020 The date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed and seffective date on the Department of State's records.
e record rd is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	/15/2023
	DocuSigned by:
	ROALY O. Spool ABEDCG4AF6FE4F5 Signature of a member or authorized representative of a member
	ADEDC64AF8FE4F5 Signature of a member or authorized representative of a member

Filing Fee: \$25.00