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SECRETARY OF STATE TALL AHASSEE FLORIO

COVER LETTER

то:	Registration Division of C	i Section Corporations	~	
SUBJEC		n Properties 14, LLC, a Florida lir	nited liability company	
300313	·/ · · · · · · · · · · · · · · · · · ·	Name of Lin	nited Liability Company	
The encl	losed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all corre	spondence concerning this matter	to the following:	
		Samuel F. Colburn, Esq.		
			Name of Person	
		Woods, Weidenmiller, Mi	chetti & Rudnick, LLP	
			Firm/Company	
		9045 Strada Stell Court, S	uite 400	
			Address	
		Naples, FL 34109		
			City/State and Zip Code	-
		scolburn@lawfirmnaples.c	om to be used for future annual report r	
For furth	ner informatic	on concerning this matter, please o		etiticaetii)
	F. Colburn, F		239 325-4070	
		ae of Person	at ()	time Telephone Number
Enclosed	f is a check fo	or the following amount:		
≘ \$25.	00 Filing Fee	El \$30.00 Filing Fee & Certificate of Status	[2] \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing A.B.	hone, e	Samue Adding	
	Mailing Add Registration		<u>Street Address:</u> Registration :	
	Division o	f Corporations	Division of C	Corporations
	PO Box 6	3327	The Centre o	f Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Millehin Properties 14, LLC, a Horida limited liability company

tName 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 $\frac{01/27/2022}{2}$ and assi; 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 "LLC" 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 reg 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 provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar $m{\varphi}$ th and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, 🎛 🔃 decement is being filed to merely reflect a change in the registered office address. Thereby 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 or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of
MGR	Jill M. Miller	700 INDUSTRIAL BLVD, STE 2	□Add
		NAPLES, FL 34104	■Remo
			[]Chang
			□Add
			□Remov
			□Change
			□Add
			□Remove
			□Change
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			□Change

					
				 	
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other than the date of listed, the date must be spenserted in this block do- we date on the Departme	eific and cannot be as not meet the a	pplicable statute	ling or more than 90		
delayed effective date,	but not an effect	tive time, at 12:0) La.m. on the ear	rlier of: (b) The 90	Oth day after
	2022		Λ		
Signate	ure of a member of	r authorized repres	chifute di a mend	A Mul	i <u>:</u>
			[]		
		2022	2022		Ju M. Mile

Filing Fee: \$25.00