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Tallhassee, FL 32301 Phone: 850-558-1500

Phone: 850-558-1500	
ACCOUNT NO.	: 12000000195
REFERENCE	: 656449 7977112
AUTHORIZATION	: Spelledena
COST LIMIT	: \$\frac{1}{25.00}
ORDER DATE : May 3, 2022	
ORDER TIME : 2:03 PM	
ORDER NO. : 656449-010	
CUSTOMER NO: 7977112	
DOMESTIC AM	ENDMENT FILING
NAME: DUNES DREAM BU	ILDERS LLC
EFFECTIVE DATE:	
XX ARTICLES OF AMENDMENT	
RESTATED ARTICLES OF INCO	RPORATION
PLEASE RETURN THE FOLLOWING AS	PROOF OF FILING:
CERTIFIED COPY	
XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STA	NDING
CONTRACTE DEDCOM A 1 '	a pyrmii
CONTACT PERSON: Alexxis Weiland	U LXI#

EXAMINER'S INITIALS:

	legistration Se Division of Cor			
CLID IEZY		REAM BUILDERS LLC		
SUBJECT	.;	Name of Lim	ited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	ırn all correspo	indence 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.co		
		E-mail address: (to be used for future annual report noti	fication)
For further	r information c	oncerning this matter, please c	all:	
Samuel Co	ol burn		239 325-4070 at ()	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed i	s a check for th	ne following amount:		
\$25.00) Filing 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)
R	lailing Addres egistration Solvision of C	Section	<u>Street Address:</u> Registration Sec Division of Cor	

P.O. Box 6327

Tallahassee, FL 32314

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

DUNES DREAM BUILDERS LLC

FILED 2022 MAY -4 AM 8: 27

(Name of the Lim	ited Liability Compa (A Florida Limited l	iny as it now appears on Liability Company)	TALLAHASSEE, FL	
The Articles of Organization for this Limited 1 Florida document number L22000165353	Liability Company	were filed on April 6	. 2022 and assigned	
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	of the limited liab	ility company here:		
The new name must be distinguishable and contain the	words "Limited Liabil	lity Company," the design	nation "L.L.C." or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		c/o Woods, Weidenmiller, Michetti & Rudnick LLP		
(Principal office address MUST BE A STRE.	ET ADDRESS)	9045 Strada Stell Court, 4th Floor		
	_	Naples, Fl. 34109		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		c/o Woods, Weidenmiller, Michetti & Rudnick LLP 9045 Strada Stell Court, 4th Floor		
		Naples, FL 34109		
B. If amending the registered agent and/or agent and/or the new registered office addressed agent. Name of New Registered Agent:			ds, enter the name of the new register	
	9045 Strada Stell Court, 4th Floor			
New Revistered Office Address:	, , , , , , , , , , , , , , , , , , , ,	Enter Florida street address		
New Registered Office Address:		Enter Florida s	treet address	
New Registered Office Address:	Naples	Enter Florida s	reet address Florida 34109	

N

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

DocuSign Envelope ID: 1A446B58-E81A-4D69-91BF-C68335D34D90
It amenuing 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>	Name	Address	Type of Action
MGR	GATES, TODD	275 INDIES WAY UNIT 1703	□Add
		NAPLES, FL 34110	≣Remove
			□Change
MGR	GATES, ANGELA	275 INDIES WAY UNIT 1703	🗆 Add
		NAPLES, FL 34110	= Remove
			□Change
AMBR	TAG NAPLES HOLDINGS, LLC,	c/o Woods, Weidenmiller, Michetti & Rudnick LLP	= Add
		9045 Strada Stell Court, 4th Floor	□Remove
		Naples. FL 34109	□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

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Pated May 3		2022				
record specifies a delayed effect is filed.	tive date, but not	t an effective tin	ne, at 12:01 a.m.	on the earlier of	f: (b) The 90th o	lay after the
ocument's effective date on the	Department of S	State's records.				
ffective date, if other than t an effective date is listed, the date r lote: If the date inserted in this	nust be specific and block does not t	d cannot be prior t neet the applica	o date of filing or m ble statutory filin	ore than 90 days	ptional) after filing.) Pursua this date will no	nt to 605.0207 t be listed as
eruation discussion of the color		May 3, 2022				
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Filing Fee: \$25.00

Typed or printed name of signee