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SEURI DERY GFICKER TALLAHASSEELFL

## **COVER LETTER**

TO: Registration Division of	on Section f Corporations
	MIER PROPERTIES OF SOUTHWEST FLORIDA, LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Articl	es of Amendment and fee(s) are submitted for filing.
Please return all cor	respondence concerning this matter to the following:
	Budge Huskey
	Name of Person
	Premier Properties of Southwest Florida, LLC
	Firm/Company
	4001 Tamiami Trail N. Suite 350
	Address
	Naples, FL 34103
	City/State and Zip Code
	### ### ##############################
For further informa	tion concerning this matter, please call:
Abigail Tesniarz	239 682-6675
	at ()  Fame of Person Area Code Daytime Telephone Number
Enclosed is a check	s for the following amount:
■ \$25.00 Filing !	Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
Divisior P.O. Bo	tion Section Registration Section of Corporations Division of Corporations

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 JUN 21 PM 2: 08 Premier Properties of Southwest Florida, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

TALLARA COCCE TALLAHASSEE FL and assigned 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 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 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.

City

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
AMBR	Budge Stratton Huskey	4001 Tamiami Trail N. Suite 350, Naples, FL 34103	<b>=</b> Add
			□Remove
			🗀 Change
AMBR	Kristine Newell	4001 Tamiami Trail N. Suite 350, Naples, FL 34103	🖹 Add
			□Remove
			Change
MGR	Linda Shearer Bradway	4001 Tamiami Trail N. Suite 350, Naples, FL 34103	<b>=</b> Add
			□Remove
			□Change
MGR	Kim Ouellette	4001 Tamiami Trail N. Suite 350, Naples, FL 34103	■Add
			□Remove
			🗆 Change
MGR	David Alan Gape	4001 Tamiami Trail N. Suite 350, Naples, FL 34103	3 ■ Add
		<u> </u>	□Remove
			Change
MGR	Patricia Kant	4001 Tamiami Trail N. Suite 350, Naples, FL 3410.	3 <b>≡</b> Add
			□Remove
			□Change

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
MGR	Sandra Greene Waterbury	4001 Tamiami Trail N. Suite 350, Naples, FL 34103	<b>≡</b> Add
			□Remove
			□Change
MGR	Chelsea Grosvenor Felts	4001 Tamiami Trail N. Suite 350, Naples, FL 34103	<b>=</b> Add
			□Remove
			□Change
MGR	Erin McDonald	4001 Tamiami Trail N. Suite 350, Naples, FL 34103	≅Add
			□Remove
MGR	Juanita Max	4001 Tamiami Trail N. Suite 350, Naples, FL 34103	i 
			Remove
			□Change
MGR	Kathleen Ogilvie	4001 Tamiami Trail N. Suite 350, Naples, FL 34103	3 ■Add
			□Remove
			Change
MGR	Matthew Good	4001 Tamiami Trail N. Suite 350, Naples, FL 34101	3 ■Add
			□Remove
			□ Change

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
MGR	Daniel R Williams	4001 Tamiami Trail N. Suite 350, Naples, FL 34103	<b>=</b> Add
			□Remove
			□Change
MGR	Maryanne Gallagher-Hare	4001 Tamiami Trail N. Suite 350, Naples, FL 34103	≣Add
			□Remove
			Change
MGR	Craig Cerreta	4001 Tamiami Trail N. Suite 350, Naples, FL 34103	<b>=</b> Add
			□Remove
			Change
MGR	Carolyn Ann Pollack Prieto	4001 Tamiami Trail N. Suite 350, Naples, FL 34103	; <b>≣</b> Add
			□Remove
			Change
MGR	Rachel Lea Fisher	4001 Tamiami Trail N. Suite 350, Naples, FL 34103	3 <b>≣</b> Add
			□ Remove
			Change
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			□ Remove
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Dated 4/17/2022 . / 2026		
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Signature of a member of authorize	depresentative of a member	
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Typed or printed name of signee