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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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2022 OCT -4 AMII: 46 SECRETARY OF STATE

COVER LETTER

| TO: Registration Se Division of Cor | | | | |
|--|---|---|--------------------------------------|---|
| | and sale lands LLC | | | |
| SUBJECT: | Name of Lim | ited Liability Company | | - |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | | |
| Please return all correspo | ondence concerning this matter | to the following: | | |
| | Jenny C. | | | |
| | | Name of Person | | _ |
| | ZenBusiness Inc. | | | |
| | | Firm/Company | | _ |
| | 336 E College Ave. Ste 30 |) [| | 2022 SE |
| | | Address | | OCT OCT |
| | Tallahassee, FL 32301 | | | 10000000000000000000000000000000000000 |
| | | City/State and Zip Code | .,, | 2022 OCT -4 AM II: 46 SECRETARY OF STATE TALLAMASSEE, FI. |
| | fulfillment@zenbusiness.co | om to be used for future annual rep | port natification) | |
| For further information of | oncerning this matter, please co | | | THE TO |
| Jenny C. | | 844 493-6 | 6249 | |
| Name o | d Person | at () Area Code | Daytime Telephone Numb | oer |
| Enclosed is a check for the | he following amount: | | | |
| ■ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ed) Certifi | Filing Fee, cate of Status & ed Copy nat copy is enclosed) |
| Mailing Address Registration | Section | _ | ion Section | |
| Division of C P.O. Box 632 | | | of Corporations re of Tallahassee | |

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| SWFL buy and sale lands LLC | | |
|---|---|--------------------------------|
| (<u>Name of the Limited Liability Comp</u> (A Florida Limited | any ay it now appears on our record Liability Company) | <u>ls.</u>) |
| The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.22000406385}{1.000406385}$. | and assigned | |
| his amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited lial | bility company here: | |
| he new name must be distinguishable and contain the words "Limited Liab | ility 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) | | 2022 OC SECRE |
| | | <u> </u> |
| | | - miles |
| nter new mailing address, if applicable: | | |
| Mailing address MAY BE A POST OFFICE BOX) | | 公司 |
| | | |
| | - | m o |
| 3. If amending the registered agent and/or registered office gent and/or the new registered office address here: | address on our records, enter | the name of the new regist |
| Name of New Registered Agent: | | |
| New Registered Office Address: | Enter Florida street addres | |
| | rmer v sorida sireci adares |) |
| | , Flo | orida |
| | $\epsilon \hat{m}_{L}$ | zaji Code |

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.

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> | Name | Address | | Type of Action |
|--------------|----------------------|-------------------------|---|-----------------|
| AMBR | Fernando L. Paduani | 2914 Dora Ave N | □Add | |
| | | Lehigh Acres, FL 33971 | | □Remove |
| | | | | ≘ Change |
| AMBR | Edmundo Ceron-García | 121 E Park Ave | | |
| | | Pleasantville, NJ 08232 | | □Remove |
| | | | | □Change |
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| Effective date, if other than the date in effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department. | e specific and a does not i | d cannot be prio meet the appli | cable statutor | ng or more than y filing requir | (option) days after filements, this d | ing.) Pursua | nt to 60; t be list | 5.0207 (ted as t |
| e record specifies a delayed effective or is filed. | ate, but noi | t an effective | ime, at 12:01 | a.m. on the e | arlier of: (b) | The 90th o | day afte | er the |
| Dated September 23 | | . 2022 | · | | | | | |
| /s/ Fernando L. Paduan | i | | | | | | | |
| | | | | ntative of a mer | | | | |

Filing Fee: \$25.00