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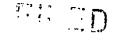
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COVER LETTER

10:	Division of Corpo		
SUBJE	CAPE RENT	AL PROPERTIES, LLC	
CODOL	C1.	Name of Limited I	ability Company
The encl	losed Articles of Ar	mendment and fee(s) are submitte	d for filing.
Please re	eturn all correspond	lence concerning this matter to the	following:
		Charles C. Jones II	
			Name of Person
		Jones, Haber & Rollings	
			Firm/Company
		1633 SE 47th Terrace	
			Address
		Cape Coral, Florida 33904	
		Cit jones@joneshaberlaw.com	State and Zip Code
	•	E-mail address: (to be	sed for future annual report notification)
For furth	er information con	cerning this matter, please call:	
Sharon C			239 542-0700 at ()
	Name of Pe	erson	Area Code Daytime Telephone Number
Enclosed	is a check for the f	following amount:	
\$25.0	00 Filing Fec	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
]]]	Mailing Address: Registration Sec Division of Corp P.O. Box 6327 Tallahassee, FL	porations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2022 DEC 27 AH 9: 59

ı	PROPERTIES, LLO					 	OF STATE
	(Name of the Limited	d Liability A Florida	Compan limited Li	y as it now appears on our ability Company)	records.)		i-, f
The Articles of Organization f]					and assigned
Florida document number L22	000412978		_•				
This amendment is submitted t	o amend the follow	ving:					
A. If amending name, <u>enter</u>	the new name of	the limit	ed liabil	ity company here:			
The new name must be distinguishab	ole and contain the wo	rds "Limite	ed Linhilit	v Company " the designation	n "I I C" or	the abbrevi	etion "I. I. C."
		ľ		1712 SE 44th Terrace		uic 6001C71	L.D.C.
Enter new principal offices a	• •	i	200	Cape Coral, Florida 3390	 Na		
(Principal office address MUS	SI BE A SIKEET	ADDRE	<u>(33)</u>	Cupe Cora, Florida 55%			
							
 Enter new mailing address, f	f applicable:			1712 SE 44th Terrace			
(Mailing address MAY BE A	POST OFFICE B	ox)		Cape Coral, Florida 3390	04		····
					•		
B. If amending the registered agent and/or the new register	l agent and/or reg ed office address	gistered i <u>here</u> :	office ac	ldress on our records,	enter the	name of	the new registered
Name of New Registe	red Agent:	Charles	C. Jones,	ti .			
New Registered Office	e Address:	1633 SE	47th Ter	тасе			
				Enter Florida street	address		
		Cape Co	ral		_, Florid	a 33904	
				City	_ -		p Code
New Registered Agent's Signati	· —						
thereby accept the appointmorovisions of all statutes rela accept the obligations of my point and the control of my point and the company has been notified in	tive to the proper position as regist change in the re	and cor ered age gistered	nplete p nt as pr	erformance of my duti ovided for in Chapter	es, and I 605, F.S.	am famil Or, if thi	iar with and is document is
			lf Chengi	ing Registered Agent, Signi	iture of Ne	w Registeri	d Agent
			_		-		

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 Title Name <u>Address</u> Type of Action MGR Kevin Offerman 1712 SE 44th Terrace **■** Add Cape Coral, Florida 33904 _ DRemove __ □Change MGR Kristy Offerman 1712 SE 44th Terrace ■Add Cape Coral, Florida 33904 □Remove Change MGR Joan Lakos 4415 SE 19th Place □Add Cape Coral, Florida 33904 **≡**Remove _ □ Change □Add Remove __ Change _ □Add Remove Change \square Add Remove

_ Change

). If amending any other in	formation, enter change(s) bere: (Attach additional sheets, if necessary.)
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	-	
. Effective date, if other the	nn the date of filing:	(optional)
(If an effective date is listed, the d	ate must be specific and cannot b	e prior to date of filing or more than 90 days after filing.) Pursuant to 605 (207 (3)()
Note: If the date inserted in	this block does not meet the the Department of State's re	applicable statutory filing requirements, this date will not be listed as the
document 3 checkive date of	i die Departitient of State \$16	cords.
f the record specifies a delayed e cord is filed.	ffective date, but not an effec	tive time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
cord is filed.		
December 22	2022	
Dated	1 1022	
	Signature of a member of	authorized representative of a member
Kevin Offerman		
TOTAL OHOLIMAN	T-=-3 -	t printed name of signee
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		Elling Foot 625 00
		Filing Fee: \$25.00