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R. HUNT 08/24/23

COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	rthington Properties LLC		
	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:	
	Monica Kummer		
		Name of Person	
	Fort Myers Broadcating C	ompany	
		Firm/Company	
	2824 Palm Beach Blvd.		
		Address	
	Fort Myers, FL 33916		2823 AUG
		City/State and Zip Code	
	monica.kummer@fmbcmai		
For further information c	e-mail address: (oncerning this matter, please c	to be used for future annual report not	ification)
Monica Kummer		239 579-5504	0
	f Person	at ()	ne Telephone Number
			,
Enclosed is a check for the	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)
Mailing Addres Registration S		<u>Street Address:</u> Registration Se	ection
Division of C		Division of Co	
P.O. Box 632		The Centre of	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FMBC Worthington Properties LLC (Name 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 $\frac{7/13/2023}{1}$ 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 "L.L.C." 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.

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
AREP	Monica Kummer	2824 Palm beach Blvd.	∃ Add
		Fort Myers, FL 33916	
			Change
AREP Mark Gilson	Mark Gilson	2824 Palm Beach Blvd.	= Add
		Fort Myers, FL 33916	_Remove
			□ Change
			□ Renfigive □
			□ Renfigive □ Plublish (2)
			Remove -
			Change
			□Add
			□Remove
			Change
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			Remove
			□ Change

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ective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to date of filing of the date inserted in this block does not meet the applicable statutory from the date on the Department of State's records.	(optional) r more than 90 days after filing.) Pursuant to 605.0 ling requirements, this date will not be listed
record specifies a delayed effective date, but not an effective time, at 12:01 a.d is filed.	n. on the earlier of: (b) The 90th day after
eated 9/29/2023	
1 (074) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	ive of a member

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