

8/14/24, 2:24 PM

Division of Corporations

Florida Department of State
Division of Corporations
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To:

Division of Corporations
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From:

Account Name : C T CORPORATION SYSTEM
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Phone : (614)280-3338
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
OTIS MANAGEMENT, LLC

Certificate of Status	0
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Corporate Filing Menu

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K. SALY

AUG 15 2024

DocuSign Envelope ID: 6B6FCACE-D30C-41E2-AAEE-864CFABA7A12

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

Otis Management, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2024 AUG 14 AM 3:48
CLERK OF CIRCUIT COURT
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on December 27, 2023 and assigned Florida document number 12400001108.

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:

4851 Tamiami Trail N, Suite 247

(Principal office address MUST BE A STREET ADDRESS)

Naples, FL 34103

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:

James G. Fitzgerald

New Registered Office Address:

4851 Tamiami Trail N, Suite 247

Enter Florida street address

Naples

Florida 34103

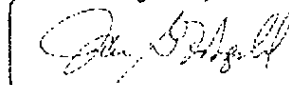
City

Zip 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.

DocuSigned by:



ACA5BA28592B444
If Changing Registered Agent, Signature of New Registered Agent

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If an existing 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>	<u>Type of Action</u>
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change
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_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change

FILED
AUG 14 PM 3:48
U.S. DISTRICT COURT
SOUTHERD DISTRICT OF CALIFORNIA
FALLMOUNT, CALIFORNIA

$$E(t) = \frac{1}{2}(\dot{\phi}(t))^2 + \frac{1}{2}(\nabla\phi(t))^2 - \int_{\mathbb{R}^N} F(x, \phi(t)) dx.$$