(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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COVER LETTER

TO:	Registration Se Division of Cor			
CHRIE		perties, L.L.C., a Florida limite	d liability company	
SUBJE	.c.:	Name of Lim	ited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please 1	return all correspo	ndence concerning this matter	to the following:	
		Michael A. Durant		
			Name of Person	
		Conroy, Conroy & Durant	, P.A.	
			Firm/Company	
		2210 Vanderbilt Beach Ro	ad, Suite 1201	
			Address	
		Naples, FL 34109		
			City/State and Zip Code	
		mdurant@naplespropertyla		<u> </u>
		E-mail address: (to be used for future annual report notification)	
For fur	ther information e	oncerning this matter, please ca	all:	
Michae	el A. Durant		239 649-5200 at ()	2015 OCT 21 SECRETARY
	Name o	f Person	Area Code Daytime Telephone	Number %
Enclose	ed is a check for th	ne following amount:		6 48
■ \$2:	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	0.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
	Registr Divisie P.O. Be	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIER ADDR Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	ESS:

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

K & N Properties, L.L.C., a Florid	a limited liability co	ompany	
(Name of the Limi	ited Liability Compa (A Florida Limited I	ny as it now appears on our re Liability Company)	ecords.)
The Articles of Organization for this Limited L Florida document number L98000000602	Liability Company	were filed on 05/13/1998	and assigned
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "Limited Liabil	lity Company," the designation	'LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2355 Traditions Court	
(Principal office address MUST BE A STREET ADDRESS)		Naples, FL 34105	
Enter new mailing address, if applicable:		2355 Traditions Court	
(Mailing address MAY BE A POST OFFICE BOX)		Naples, FL 34105	<u> </u>
B. If amending the registered agent and registered agent and/or the new registered of			Mo Im
Name of New Registered Agent:	Michael A. Du	rant	
New Registered Office Address:	2210 Vanderbi	It Beach Road, Suite 1201 Enter Florida street a	ddrass
	Naples	Emer r iorua sireet a	24100
	- Trupies	City	, Florida 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.

If Changing Registered Agent, Signature of New Registered Agent

thorized Person(s) authorized to manage, enter the title, name, and address of each person being added om our records:

R = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	NATOLI, VINCE	28 RESEARCH PARK CIRCLE	
		ST CHARLES, MO 63304	Remove
			Change
MGR	KRUPP, LESTER	2355 Traditions Court	□ Add
		Naples, FL 34105	□ Remove
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Tective date, if other than	10/09/2015	Coption (Option	W
an effective date is listed, the date ote: If the date inserted in this	must be specific and cannot be prior to date of filing is block does not meet the applicable statutory be Department of State's records.	g or more than 90 days after filing requirements, this	filmg.) Pursuant to 605.02 date will not be listed
e record specifies a dela The 90th day after the	yed effective date, but not an effecti record is filed.	ive time, at 12:01 a	.m. on the earlier
October 9	2015		
		\geq	
1/1CD		/	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00