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COVER LETTER

| TO: Registration Se Division of Cor | | | |
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| | fotor Condos Naples, 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 | ndence concerning this matter | to the following: | |
| | Kevin A. Denti, Esquire | | |
| | | Name of Person | |
| | Kevin A. Denti, P.A. | | |
| | | Firm/Company | |
| | 2180 Immokalee Road - S | uite #316 | |
| | | Address | |
| | Naples, Florida 34110 | | |
| | | City/State and Zip Code | |
| | kdenti@dentilaw.com | | |
| - 0 1 10 | | to be used for future annual report not | mication) |
| For further information c | oncerning this matter, please c | att: | |
| Kevin A. Denti, Esquire | | 239 260-8111 at () | |
| Name o | f Person | Area Code Daytir | ne Telephone Number |
| Enclosed is a check for th | ne following amount: | | |
| ■ \$25.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Section Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing Address Registration S Division of C P.O. Box 632 | Section Corporations 17 | Street Address: Registration So Division of Co The Centre of | orporations Tallahassee |
| Tallahassee, l | FL 32314 | 2415 N. Monri | oe Street, Suite 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2024 JUN 26 AM 8: 43 Iron Gate Motor Condos Naples, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) TALLAHASSEE FLORIDA The Articles of Organization for this Limited Liability Company were filed on $\frac{09/14/21}{1}$ Florida document number L21000405807 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: East Trail Corporate Center, LLC 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: (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.

City

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> | Address | Type of Action |
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| i effecti <u>te:</u> If t | date, if other than the date is listed, the date inserted in this is effective date on the | must be specific s block does no | and cannot be pot meet the ap | plicable statut | iling or more than ory filing require | (option 00 days after fi ements, this o | ling.) Purs | uant to 605.0 not be listed | 020 d a |
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| | | Signature o | i a member or | authorized repre | sentative of a mer | noer | | | |