F/OTOPICE Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : DUSS, KENNEY, SAFER, HAMPTON & JOOS, P.A.

Account Number : 120090000089

: (904)543-4300

Fax Number

: (904)543-4301

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: V CUMMIDS @ J

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WHITLATCH PROPERTIES, L.L.C.

> Certificate of Status Certified Copy Page Count 03 Estimated Charge \$25,00

K. SALY EXAMINER

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2015 JUL -9 AM 8: 41

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

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WHITLATCH PROPERTIES, L.L.C. (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 February 1, 2007 and assigned Florida document number L07000012357 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: (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 Florida 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

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company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered 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 H15000158032

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Kathlyn Stamford	353 Oldfield Drive	
		Fleming Island, Florida 32003	■ Remove
			Change
MGR	Cynthia L. Crowe	3146 Bliss Road	Add
		Orange Park, Florida 32065	□ Remove
			Change
			□ Add
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	·		GA GA
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he 90th day afte	r the record is							
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	Signan	re of a member	or authorized r	epresentativ	e of a me	nber		·

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