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J. BRYAN

AUG 28 2012

EXAMINER

COVER LETTER

| TO: | Registration S Division of Co | | • | | |
|---------|----------------------------------|---|---|---------------------------------------|----------------|
| SUBJE | ECT: | ICON | N 2301, LLC | | |
| | | | ited Liability Company | | |
| The en | closed Articles of | f Amendment and fee(s) are sul | omitted for filing. | | |
| Please | return all corresp | ondence concerning this matter | to the following: | | |
| | | | John A. Gelety, Esq. | | |
| | | | Name of Person | | |
| | | | John A. Gelety, PA | · · · · · · · · · · · · · · · · · · · | |
| | | | Firm/Company | | |
| | | 800 S | Douglas Road, STE 880 | | THE AUG 27 |
| | | | Address | | AUG 27 PH (|
| | | С | oral Gables, FL 33134 | | 2 F |
| | | | City/State and Zip Code | | |
| | | ja F. mail addraga. | gelety@bellsouth.net to be used for future annual report notificat | | |
| For fur | ther information | concerning this matter, please of | | ion) | PH 3: 43 |
| | | A. Gelety, Esq. | ut (| 4.9422 | · <u>·····</u> |
| | Name | of Person | Ārea Code & Daytime Te | elephone Number | |
| Enclos | ed is a check for | the following amount: | | | |
| \$25 | 5.00 Filing Fee | [✓]\$30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certified (| e of Status & |
| | Regisi Divisi P.O. E | LING ADDRESS: tration Section on of Corporations Box 6327 assee, FL 32314 | STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 32301 | ons r Círcle | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| ICON | 2301, LLC | | |
|---|---|--------------------------|---|
| (<u>Name of the Limited Liability Co</u> (A Florida Limit | mpany as it now appears ted Liability Company) | s on our records.) | |
| The Articles of Organization for this Limited Liability Comp | oany were filed on | May 9, 2011 | and assigned |
| Florida document number Lii000054736 | | | |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the limited | liability company here | 2: | |
| XR Deve | lopment LLC | | |
| The new name must be distinguishable and end with the words "L.L.C." | Limited Liability Compar | ny," the designation | "LLC" or the abbreviation |
| Enter new principal offices address, if applicable: | | | |
| (Principal office address MUST BE A STREET ADDRESS | <u> </u> | | |
| | | | 2 |
| | | | |
| Enter new mailing address, if applicable: | | | 10 to |
| (Mailing address MAY BE A POST OFFICE BOX) | | | · · · · · · · · · · · · · · · · · · · |
| | | | |
| B. If amending the registered agent and/or registered registered agent and/or the new registered office address | | ur records, <u>enter</u> | the name of the new |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| | Ente | er Florida street a | ddress |
| | | , Florida _ | |
| | 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 608, 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

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

| | Name | Address | Type of Action |
|-------------|---------------------------------------|---|----------------|
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| | | | **** |
| . If ameno | ling any other information, enter | change(s) here: (Attach additional sheets, if | necessary.) |
| . If amend | ling any other information, enter | change(s) here: (Attach additional sheets, ij | necessary.) |
| . If amend | ling any other information, enter | change(s) here: (Attach additional sheets, ij | SEULE AUG 27 |
| . If amend | Agust 23 | change(s) here: (Attach additional sheets, if | SEUME AUG |

Page 2 of 2

Filing Fee: \$25.00