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| (Re | questor's Name) | |
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| PICK-UP | WAIT | MAIL |
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| Certified Copies | _ Certificates | s of Status |
| Secial Instructions to | Filing Officer: | |
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2013 NOV -4 AT 9: 05

J. SAULSBERRY EXAMPLER

NOV 6 2013

11-1-13

Please friend the Corporation.

My return address 15 8998 Sladin Court, Orlando, FZ 32819. My # 15 407-319-6834.

Thouks, 21/3/101-4 11/9/101-4 11/

COVER LETTER

| TO: Registration Section Division of Corporations | |
|---|-------------|
| SUBJECT: Waterford Oaks LLC | _ |
| Name of Limited Liability Company | - |
| The enclosed Articles of Amendment and fee(s) are submitted for filing. | |
| Please return all correspondence concerning this matter to the following: | |
| Joseph Schuemann | |
| Name of Person | _ |
| Firm/Company | _ |
| 8998 Gladin Court | -2 |
| Address | 70:3 HOV -4 |
| Orlando, FL 32819 | - P |
| City/State and Zip Code joe@bluerockcommercial.com E-mail address: (to be used for future annual report notification) | _ |
| For further information concerning this matter, please call: | 90.6 |
| Joseph Schuemann 407,319-6834 | , |
| Name of Person Area Code & Daytime Telephone Num | ber |
| Enclosed is a check for the following amount: | |

□\$55.00 Filing Fee & Certified Copy

(additional copy is enclosed)

\$25.00 Filing Fee

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

□\$30.00 Filing Fee & Certificate of Status

STREET/COURIER ADDRESS:

□\$60.00 Filing Fee, Certificate of Status &

(additional copy is enclosed)

Certified Copy

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Waterford Oaks LLC | hills: Company as it now onne | ers on our records) | |
|---|---|-----------------------------|--|
| (A Flo | bility Company as it now apperida Limited Liability Company |) | |
| The Articles of Organization for this Limited Liabil Florida document number L11000122586 | ity Company were filed on O | ctober 27, 2011 | _ and assigned |
| This amendment is submitted to amend the following | ng: | | |
| A. If amending name, enter the new name of the | limited liability company h | ere: | |
| | | | |
| The new name must be distinguishable and end with the "L.L.C." | e words "Limited Liability Com | pany," the designation "LL0 | C" or the abbreviation |
| Enter new principal offices address, if applicable | | · | 29 |
| (Principal office address MUST BE A STREET A | DDRESS) | | THE STATE OF THE S |
| | | | |
| | | | . F |
| Enter new mailing address, if applicable: | | | |
| (Mailing address MAY BE A POST OFFICE BOX | | | <u> </u> |
| | <u></u> | • | . · · · · · · · · |
| | | | |
| B. If amending the registered agent and/or r | | our records, enter the | name of the new |
| registered agent and/or the new registered office | address nere: | | |
| Name of New Registered Agent: | | | |
| | | | |
| New Registered Office Address: | | Enter Florida street addre | |
| | _ | | |
| - | 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 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

| <u>Title</u> | Name | Address | Type of Action |
|--------------|----------------|----------------------|----------------|
| MGRM | Marc Young | 6761 Valhalla Way | Add |
| | | Windermere, FL 34786 | Remove |
| MGRM | Lincoln Taylor | 3302 Coronet Ave | Add |
| | | Orlando, FL 32833 | Remove |
| | | | Add |
| | | | Remove |
| *** | | | Add |
| | | | Remove |
| | | | Add |
| | | | Remove |
| | | | Add |
| | | | Remove |

|). If a men | nding any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
|-------------|--|
| _ | |
| _ | |
| _ | |
| _ | |
| _ | November 1, 2013. |
| Dated | Doell Mela |
| | Signature of a member of authorized representative of a member |
| | Joseph Schuemann ${\cal V}$ |
| | Typed or printed name of signee |

Page 3 of 3

Filing Fee: \$25.00