

L14000181894

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

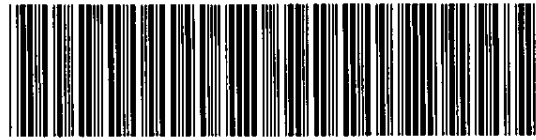
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Student Commons Partners, LLC

- ___ Art of Inc. File _____
- ___ LTD Partnership File _____
- ___ Foreign Corp. File _____
- ___ L.C. File _____
- ___ Fictitious Name File _____
- ___ Trade/Service Mark _____
- ___ Merger File _____
- ___ Art. of Amend. File _____
- ___ RA Resignation _____
- ___ Dissolution / Withdrawal _____
- ___ Annual Report / Reinstatement _____
- ___ Cert. Copy _____
- ___ Photo Copy _____
- ___ Certificate of Good Standing _____
- ___ Certificate of Status _____
- ___ Certificate of Fictitious Name _____
- ___ Corp Record Search _____
- ___ Officer Search _____
- ___ Fictitious Search _____
- ___ Fictitious Owner Search _____
- ___ Vehicle Search _____
- ___ Driving Record _____
- ___ UCC 1 or 3 File _____
- ___ UCC 11 Search _____
- ___ UCC 11 Retrieval _____
- ___ Courier _____

Signature _____

Requested by: SETH 12/15/14
Name Date Time

Walk-In _____ Will Pick Up _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Student Commons Partners, 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:

Michael J. Sheahan

Name of Person

Firm/Company

801 N. Orange Ave., Suite 518

Address

Orlando, FL 32801

City/State and Zip Code

chip.webb@tramellwebb.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John L. Webb at (407) 420-4792
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
2014 DEC 15 AM 9:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Student Commons Partners, LLC

(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 November 24, 2014 and assigned
Florida document number L14000181894

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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 _____

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 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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	John L. Webb	801 N. Orange Ave	<input type="checkbox"/> Add
		Suite 518	<input checked="" type="checkbox"/> Remove
		Orlando, FL 32801	
MGR	Joe B. Tramell	801 N. Orange Ave	<input type="checkbox"/> Add
		Suite 518	<input checked="" type="checkbox"/> Remove
		Orlando, FL 32801	
MGR	Torbjorn Arnheim	801 N. Orange Ave	<input type="checkbox"/> Add
		Suite 518	<input checked="" type="checkbox"/> Remove
		Orlando, FL 32801	
MGR	Tramell Webb Partners, Inc.	801 N. Orange Ave	<input type="checkbox"/> Add
		Suite 518	<input checked="" type="checkbox"/> Remove
		Orlando, FL 32801	
AMBR	John L. Webb	801 N. Orange Ave	<input checked="" type="checkbox"/> Add
		Suite 518	<input type="checkbox"/> Remove
		Orlando, FL 32801	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

ARTICLE IV:

The name and address of the person authorized to manage the LLC:

John L. Webb

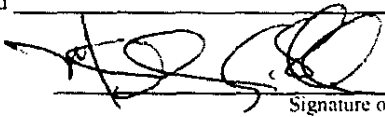
is the Authorized Member (AMBR), also named the Managing Member

801 N. Orange Ave., Suite 518, Orlando, FL 32801

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated December 15, 2014



Signature of a member or authorized representative of a member

Michael J. Sheahan

Typed or printed name of signee

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2014 DEC 15 AM 9:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA