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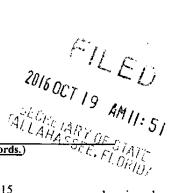
Division of Co		·	
3051 Heat SUBJECT:	hrow, LLC		
SUBJECT:	Name of Lim	ited Liability Company	·
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	•
	Joseph J. Steinbicker		
		Name of Person	
	3051 Heathrow, LLC		
		Firm/Company	······································
	1525 International Parkwa	y, Suite 3051	
		Address	· · · · · · · · · · · · · · · · · · ·
	Lake Mary, Florida 32746		
		City/State and Zip Code	·
	joe@jjsteinbicker.com	to be used for future annual report notifi	action)
For further information of	concerning this matter, please ca	•	cation)
Joseph J. Steinbicker		407 453-0266 at ()	
Name (of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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



3051 Heathrow, 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 Compar	ny were filed on October 1	2, 2015 and assigned
Florida document number L15000173079		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liz	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designati	on "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)		
www.com		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he Name of New Registered Agent:		ecords, enter the name of the new
New Registered Office Address:	Enter Florida stre	et address
		Florida
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>	
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	te performance of my du s provided for in Chapte	ties, and I am familiar with and r 605, F.S. Or, if this document is
If Ch	anging Registered Agent. Sig	nature 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Jacob W. Theisen	1525 International Parkway	Add
		Suite 3051	■ Remove
		Lake Mary, FL 32746	☐ Change
			Remove
			GR Change
			Remove Charige
			Change
			□ Remove
			Change
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			Add
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ctive date, if other than the effective date is listed, the date m	e date of filing: ust be specific and c	annot be prior t	o date of filing or r	op nore than 90 days af	tional) ter filing.) Pursuant to 605.03
e: If the date inserted in this unent's effective date on the	olock does not me	et the applica	ble statutory fili	ig requirements, t	his date will not be listed
ecord specifies a delayene 90th day after the re	ed effective da cord is filed.	ite, but not	an effective	time, at 12:01	a.m. on the earlier
October 14	,	2016	_•		
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Typed or printed name of signee

Filing Fee: \$25.00