

L16000257986 10/18/16

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : GARY, DYTRYCH & RYAN, P.A.
Account Number : I19990000255
Phone : (561)844-3700
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 625 FLAGLER ACQUISITION, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

D. SCOTT
OCT 19 2016

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

((H16000257986 3)))

625 FLAGLER ACQUISITION, 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 08/30/2016 and assigned Florida document number L16000161857.

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 "L.L.C."

Enter new principal offices address, if applicable:

230 SOUTH COUNTY ROAD

(Principal office address MUST BE A STREET ADDRESS)

PALM BEACH, FL 33480

ATTN: Thomas C. Quick

Enter new mailing address, if applicable:

230 SOUTH COUNTY ROAD

(Mailing address MAY BE A POST OFFICE BOX)

PALM BEACH, FL 33480

ATTN: Thomas C. Quick

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

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TALLAHASSEE, 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 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	THOMAS C. QUICK	230 SOUTH COUNTY ROAD	<input checked="" type="checkbox"/> Add
		PALM BEACH, FL 33480	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	LESLIE QUICK	230 SOUTH COUNTY ROAD	<input checked="" type="checkbox"/> Add
		PALM BEACH, FL 33480	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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