

Division of Corporations

Page 1 of 2

L17000042761
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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

From: Account Name : REGENCY CENTERS
Account Number : I20040000052
Phone : (904) 598-7000
Fax Number : ~~(904) 354-1832~~ 904-358-9344

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: jonibonnell@regencycenters.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
EQUITY ONE REALTY & MANAGEMENT FL LLC**

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

RECEIVED
2017 MAR 15 PM 3:22
FALLS CREEK, FLORIDA

FILED
17 MAR 15 AM 9:43

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EQUITY ONE REALTY & MANAGEMENT FL 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 February 23, 2017 and assigned Florida document number L17000042761

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:

One Independent Drive, Suite 114

(Principal office address MUST BE A STREET ADDRESS)

Jacksonville, FL 32202

Enter new mailing address, if applicable:

One Independent Drive, Suite 114

(Mailing address MAY BE A POST OFFICE BOX)

Jacksonville, FL 32202

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:

F&L Corp

New Registered Office Address:

One Independent Drive, Suite 1300

Enter Florida street address

Jacksonville

Florida 32202

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.

Handwritten signature of Charles V. Hedrick

If Changing Registered Agent, Signature of New Registered Agent

Authorized Signatory for F&L Corp.

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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>
AMBR	Equity One, Inc.	1600 NE Miami Gardens Drive	<input type="checkbox"/> Add
		North Miami Beach, FL 33179	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Regency Centers, L.P.	One Independent Drive, Suite 114	<input checked="" type="checkbox"/> Add
		Jacksonville, FL 32202	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 3:16 PM

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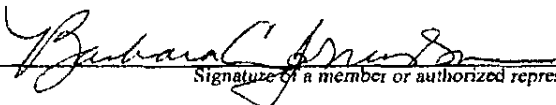
Multiple horizontal lines for amending information.

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E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated March 15, 2017


Signature of a member or authorized representative of a member

Barbara C. Johnston
Typed or printed name of signee