10/19/2017



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Account Number : I20170000081 Phone : (727)443-5190 Fax Number : (727)474-9949

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TURNING POINT PROPERTY LLC

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## ARTICLES OF AMERIDMENT TO ARTICLES OF ORGANIZATION OF

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Turning Point Property LLC		r
(Name of the Limited Liability Compan (A Florida Limited L	y as it now appears on our r	ecords.)
	-	5 5 12
The Articles of Organization for this Limited Liability Company	were filed on October 17,	2017 and essigned
Florida daguagent guestar L17000214992		
		至口
This amendment is submitted to amend the following:		, e
A. If amending name, enter the new name of the limited liabi	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty 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)		
(Principal Office agaress brost BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	<u></u>	
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>	
n ic i i i i i i i i i i i i i i i i i i	g	ands onto the name of the name
B. If amending the registered agent and/or registered office and/or the new registered office address here		cords, enter the name of the new
		1
Name of New Registered Agent:		1
Name of New Registered Agent.		
New Registered Office Address:	Enter Florida street	address
	Liner I tortas sireer	pages, can
	City	, Florida
Now the state of American Community of the state of American	City	ay was
New Registered Agent's Signature, if changing Registered Agent:		عابد و مد
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete proper and complete proper are completed.	e to act in this capacity	I further agree to comply with the
accept the obligations of my position as registered agent as p	rovides 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 confi	rm 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				
Title	Name	<u>Address</u>	Type of Action	
AMBR	Peter D. Crabtree	1450 Wilson Road,		
		Clearwater, FL 33755	■ Remove	
		415 d	☐ Change	
			bb∧ □	
			Remove	
		1/	□ Change	
			GRange T	
			□ €frange	
			Remove	
			☐ Change	
			Remove	
			Change	
			Add	
			☐ Remove	
			□ Change	

s: M. Faehner, Esq. LLCFax: (727) 474-9949	To: 8506176393@rcfax.con Fax: (850) 617-6383	Page 5 of 5 10/19/2017 10:59 AM
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E. Effective date, if other than the	e date of filing:	(optional)
(If an effective date is listed, the date mu <u>Note:</u> If the date inserted in this b document's effective date on the E	st be specific and cannot be prior to dute of filing or more to lock does not meet the applicable statutory filing reconcepartment of State's records.	quirements, this date will not be listed as the
If the record specifies a delaye (b) The 90th day after the rec	d effective date, but not an effective time cord is filed.	e, at 12:01 a.m. on the earlier of:
Dated October 19	2017	
	MINATER	
	Signature of a member or authorized representative of a	member
Michael J. Faehner, Es	a. V	
	Typed or printed name of signee	

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