

**LO7000108627**

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.

(((H140001211093)))



H140001211093ABCT

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : RITTER, ZARETSKY, LIEBER & JAIME, LLC  
Account Number : I20010000015  
Phone : (305)372-0933  
Fax Number : (305)704-8111

FILED  
2014 MAY 22 AM 8:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Email Address: Vivian@r2llaw.com

RECEIVED  
14 MAY 22 AM 7:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
RAVENWOOD APARTMENTS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	034
Estimated Charge	\$25.00

May 22, 2014, 4:40AM, AAU CYBER CAMPUS

FILED No 1563 P. 2/4

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

2014 MAY 22 AM 8:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Ravenwood Apartments, 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 10/26/2007 and assigned Florida document number L07000108627

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:

Ritter, Zaretsky, Lieber & Jaime, LLP

New Registered Office Address:

2915 Biscayne Blvd., Suite 300

Enter Florida street address

Miami

City

Florida

33137

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>
MGRM	Education To Equity, Corp		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
MGR	High Rise Investments, LLC	1904 Ogden Avenue	<input checked="" type="checkbox"/> Add
		Lisle, IL 60532	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

---



---



---



---

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: 5-15-14

  
 \_\_\_\_\_  
 Signature of a member or authorized representative of a member

Thomas R. Standish  
 \_\_\_\_\_  
 Typed or printed name of signer

FILED  
 2014 MAY 22 AM 8:22  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA