


NC  
R. WHITE  
FEB 14 2018

file Second  
(2 of 4)

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 069127 4983A  
AUTHORIZATION :   
COST LIMIT : \$ 55.00

ORDER DATE : February 13, 2018  
ORDER TIME : 1:15 PM  
ORDER NO. : 069127-010  
CUSTOMER NO: 4983A

DOMESTIC AMENDMENT FILING

NAME: TCB TALLAHASSEE AUGUSTINE LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT  
       RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
       PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER'S INITIALS: \_\_\_\_\_

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** TCB Tallahassee Augustine LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Howard Grossman

\_\_\_\_\_  
Name of Person

Cozen O'Connor

\_\_\_\_\_  
Firm/Company

One Liberty Place, 1650 Market Street, Suite 2800

\_\_\_\_\_  
Address

Philadelphia, PA 19103

\_\_\_\_\_  
City/State and Zip Code

hgrossman@cozen.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Howard Grossman

215 665-4176

at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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**

18 FEB 13 AM 11:35

TCB Tallahassee Augustine 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 03/02/2000 and assigned  
Florida document number L00000002409.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Owl Augustine LLC

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:**

**(Principal office address MUST BE A STREET ADDRESS)**

100 High Street, Suite 1102

Boston, MA 02110

Attention: Lee E. Rosenthal

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

100 High Street, Suite 1102

Boston, MA 02110

Attention: Lee E. Rosenthal

**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*

*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 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	Beverly J. Bates	c/o The Community Builders, Inc.	<input type="checkbox"/> Add
		185 Dartmouth Street	<input type="checkbox"/> Remove
		Boston, MA 02116	<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
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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	Samuel J. Dubbin	c/o Owl Tallahassee Housing, Inc.	<input checked="" type="checkbox"/> Add
		1200 Anastasia Avenue, Suite 300	<input type="checkbox"/> Remove
		Coral Gables, FL 33134	<input type="checkbox"/> Change
MGR	Matthew D. Thomas	c/o Owl Tallahassee Housing, Inc.	<input checked="" type="checkbox"/> Add
		1200 Anastasia Avenue, Suite 300	<input type="checkbox"/> Remove
		Coral Gables, FL 33134	<input type="checkbox"/> Change
MGR	Daniel J. Zailskas	c/o Owl Tallahassee Housing, Inc.	<input checked="" type="checkbox"/> Add
		1200 Anastasia Avenue, Suite 300	<input type="checkbox"/> Remove
		Coral Gables, FL 33134	<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

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

[illegible]

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 February \_\_\_\_\_, 2018

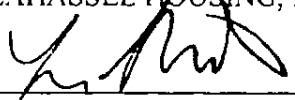
Signature of a member or authorized representative of a member

Owl Tallahassee Housing, Inc., sole member / Lee E. Rosenthal, Authorized Agent (please see attachment)

Typed or printed name of signee

**ATTACHMENT TO**  
**OWL AUGUSTINE LLC -**  
**ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION**

By: OWL TALLAHASSEE HOUSING, INC., sole member

By: \_\_\_\_\_

Lee E. Rosenthal, Authorized Agent



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