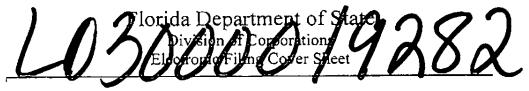
08/22/2017 10:46 Division of Corporations

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Division of Corporations

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From:

Account Name : VCORP SERVICES, LLC Account Number : 120080000067

Phone

; (845)425-0077

Fax Number

: (845)818-3589

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

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RIDGECREST MOBILE HOME PARK, LLC

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Page Count	03
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RIDGECREST MOBILE HOME PARK, LLC (Name of the Limited Limited (A Florida Limited)	ON BE IT DAM SOMERIE OU DAT ENTO	<u> </u>
The Articles of Organization for this Limited Liability Company Florida document number 103000019282		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia		70 27
Thu new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation	"LLC" of the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		55. 22 m
(Principal office address MUST BE A STREET ADDRESS)		T1: 6,
		Tropic to
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		<del>``</del>
(Mailing address MAT BE A LOGI S		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	i office address on our s here:	records, enter the name of the t
agent and/or registere	i office address on our i bere:	records, epter the name of the n
B. If amending the registered agent and/or registered registered agent and/or the new registered office address  Name of New Registered Agent:	d office address on our here:	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	<u>:</u>	reel address
B. If amending the registered agent and/or registered registered agent and/or the new registered office address  Name of New Registered Agent:	Enter Florida st	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address  Name of New Registered Agent:  New Registered Office Address:	Enter Florida st City	reel address, Florids Zip Code
B. If amending the registered agent and/or registered registered agent and/or the new registered office address.  Name of New Registered Agent:  New Registered Office Address:  New Registered Agent's Signature, if chapging Registered Agent and thereby accept the appointment as registered agent and provisions of all statutes relative to the proper and comprovisions as registered agent and the proper and comprovisions as re	Enter Florida so  City  gent: d agree to act in this cape	reet address  Florids  Zip Code  acity. I further agree to comply widuties, and I am familiar with an
B. If amending the registered agent and/or registered registered agent and/or the new registered office address  Name of New Registered Agent:  New Registered Office Address:  New Registered Agent's Signature, if chapping Registered Agent and the appointment as a registered agent and the appointment as a registered agent and the appointment as a registered agent a	Enter Florida so City gent: d agree to act in this capa plete performance of my nt as provided for in Cha, office address, I hereby o	reet address  Florids  Zip Code  acity. I further agree to comply widuties, and I am familiar with an

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added Of removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name .	Address	Type of Action	
AMBR	Tamara Peterson	2251 N US Hwy I		
		Fort Pierce, PL 34946	□ Remove	
			Change	
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Las & Cilings	(optional)	
Mective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior to date of the date in this block does not meet the applicable of the date inserted in this block does not meet the applicable of the date of the Department of State's records.	te of filing or more than 90 days after filling.) Pursuant to 80 statutory filing requirements, this date will not be list	sted
ocument's effective date on the responsibility		
a conduct data but not as	effective time, at 12:01 a.m. on the ear	tler
e record specifies a delayed effective date, but not an The 90th day after the record is filed.		
2017		
ated July 26		

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