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COVER LETTER

TO:	Registration Sec Division of Corp		١,	e.	14 m
SUBJE	CCT:	Centerline Home	s Enterprises Three	e, LLC	
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The en	closed Articles of A	Amendment and fee(s) are su	bmitted for filing.		
Please	return all correspor	ndence concerning this matte	er to the following:		
	•		Jeffrey Kronengold		
			Name of Person		
	CRS Organization, Inc.				
Firm/Company					
		Centerline Homes Enterprises Three, LLC Name of Limited Liability Company Articles of Amendment and fee(s) are submitted for filing. Il correspondence concerning this matter to the following: Jeffrey Kronengold Name of Person			
Address					
Coral Springs, FL 33071					
			· ·		
		jkronen E-mail address: (gold@centerlinehomes (to be used for future annual repo	ort notification)	
For furt	her information co		-	,	
			at (954)	344-8040	
	Name of	Person	Area Code & I	Daytime Telephone Numbe	r
Enclose	d is a check for the	following amount:			
₽ \$25.	00 Filing Fee		Certified Copy	Certifica closed) Certified	ite of Status & l Copy

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

The Articles of Organization for this Limited Liability Company were filed on	Centerline Homes Ente (Name of the Limited Liability Compan (A Florida Limited Li	erprises Thre	e, LLC s on our records.)	
Florida document number L04000067513 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Bent Creek Preserve, LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviati "LL.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 naregistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Enter Florida street address City	(A Florida Limited Li	ability Company)		
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New Registered Office Address: Enter Florida street address 2				
New Registered Office Address: Enter Florida street address 2				
Enter Florida street address , Florida , Florida City	Name of New Registered Agent:		<u>A</u>	SE 72
Enter Florida street address , Florida , Florida City	New Registered Office Address:		ָבַ ב	JA T
City Zip Code		Ente	er Florida street add	225 N 225
City Zip Code			. Florida	
New Registered Agent's Signature, if changing Registered Agent:		City	,	n Zip Code
	New Registered Agent's Signature, if changing Registered Agent:		i di Rico	TATE 19
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 an accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is	the provisions of all statutes relative to the proper and comple	ete performance d	of my duties, and I ar	m familiar with ar

If Changing Registered Agent, Signature of New Registered Agent

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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u> <u>Name</u> **Address Type of Action** ☐ Add Remove ☐ Add Remove $\prod Add$ Remove ☐ Add Remove □Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) January 19 2012 Dated ____ Signature of a member or authorized representative of a member Jeffrey Kronengold Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00