

L04000093957

**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.

(((H14000006629 3)))



H140000066293ABC

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 : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

RECEIVED
 14 JAN -9 AM 8:05
 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: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GOODFOREST LLC**

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$60.00

RECEIVED

14 JAN -9 PM 1:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu

Help
T. Burch JAN 10 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Goodforest 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:

Heidi Gajoch

Name of Person

Forest City Enterprises, Inc.

Firm/Company

50 Public Square, Terminal Tower, Ste. 1360

Address

Cleveland, Ohio 44113

City/State and Zip Code

GeriPresti@forestcity.net

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

For further information concerning this matter, please call:

Geri Presti

Name of Person

at (216)

Area Code

263-6206

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

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

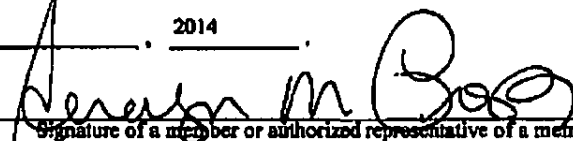
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	TGC Wiregrass Ltd.	777 South Flagler Drive	<input type="checkbox"/> Add
		West Palm Beach, FL 33401	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

RECEIVED
JAN 9 AM 9:05
TALLAHASSEE
FLORIDA

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)
(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b))

Dated January 9, 2014



Signature of a member or authorized representative of a member
Forest City Wiregrass LLC, its MGR, by Forest City Commercial Group Inc, its MGR, by Geraldyn Presti, Sec.

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

14 JAN -9 AM 8:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA