Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H14000006629 3)))



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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

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

Email Address:	
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **GOODFOREST LLC**

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

Electronic Filing Menu

Corporate Filing Menu

Help T. Buren JAN 1 0 2014,

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COVER LETTER

TO: Reg Div	pistration Section islon of Corpor	on rations		
SUBJECT:	Goodfarest LL	.c		
Bubbaci		Name of Limit	ted Liability Company	-
The encloses	i Articles of An	nandment and fee(s) are sub	mitted for filing.	
Please return	all corresponde	ence concerning this matter	to the following:	
		Heidi G	ajoch	
			Name of Person	
		Forest City	Enterprises, Inc.	•
			Firm/Company	
		50 Public Squ	uare, Terminal Tower,	Ste. 1360
•			Address	
		Cleveland, Oh	nio 44113	
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	,	GeriPresti@forestcity.net		
Por further i	aformation con	e-man saureus: (cerning this matter, please c	(to be used for future annual report notificati all;	nn)
Geri	Presti		216 263-6206	
 	Name of P	erson	at (216) 263 - 6206 Area Code Doyrime Tel	ephone Number
Enclosed is	a check for the t	following amount:		
□ \$25,00 F	iling 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 Taliahassee, FL 32314 STREET/COURIER ADDRESS: Registration Section Division of Corporations Ciliton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Goodforest LLC			
(Name of the Limited Liability Compa- (A Florida Limited L	y as it now appears on our liability Company)	records.)	
The Articles of Organization for this Limited Liability Company Florida document number L04000093957	were filed on 12/28/2004	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	lity company bere:		
FC Wiregrass SPB, LLC			
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the	designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Princinal office address MUST BE A STREET ADDRESS)			
		AR 第	
Enter new malling address, if applicable:		37	
(Mailing address MAY BE A POST OFFICE BOX)		in (
		en de la companya de	
		<u></u>	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	Nce address on our reco ⊱	rds, enter the name of the new	
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:			
	Enter Florid	la street address	
		, Florida	
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent;			
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties provided for in Chapter 60	, and I am familiar with and S, F.S. Or, if this document is	

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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;

Title	Name	Address	Type of Action
MGR	TGC Wiregrass Ltd.	777 South Flagler Drive	Add
		West Palm Beach, FL 33401	Remove
			Add
			. —
			Remove
			No. 1
			mi, ma
			Removes OS
		_	
			Remove
	-		
			Rezpove
	·		
			Add
			Remove

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D. If amending any other infe	rmation, enter change(s) here: (A	Attach additional sheets, if necessary,)
		M	
			
E. Effective date, if other that (If an offective date is listed, the	n the date of filing: e date must be specific and cannot b	(optional) os more than 90 days after filing.) (60:	— 5.0207 (3)(b)
Dated January 9,	, 2014	Q.	
	Signature of a member or authorize	ed representative of a member	
Forest City Wireg		mercial Group Inc, its MGR, by Geralyn	Presti, Sec.
	Typed or printed no	Harte on signise	

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Filing Fee: \$25.00