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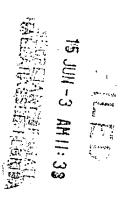
| ·(Re | questor's Name) | |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

| TO: Registration' Section Division of Corporations | |
|--|--|
| SUBJECT: 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: | |
| Robert DiGeronino | |
| Robert DiGeronimo Name of Person White Sands LLC Firm/Company | |
| | |
| 269 Arbor St. Address | |
| | |
| City/State and Zip Code robdig 37 @ comcast. net E-mail address: (to be used for future annual report notification) | |
| For further information concerning this matter, please call: | |
| Name of Person at (978) 660-4516 Area Code Daytime Telephone Number | |
| Enclosed is a check for the following amount: | |
| □ \$25.00 Filing Fee \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

White Sands, LLC

| (Name of the Lin | nited Liability Compa (A Florida Limited I | ny as it now appears on ou lability Company) | rrecords.) | | |
|--|---|--|--|---|-----------|
| The Articles of Organization for this Limited Florida document number L05000034357 | Liability Company | were filed on April 7, 20 | 905 | and assigr | ned |
| This amendment is submitted to amend the following | llowing: | | | | |
| A. If amending name, enter the new name | of the limited liabi | ility company here: | { | | |
| White Sands View, LLC | | | | | |
| The new name must be distinguishable and contain the | words "Limited Liabil | ity Company," the designation | n "LLC" or the at | breviation "L.L.C | 2,37 |
| Enter new principal offices address, if appli | cable: | 269 Arbor Street | | | |
| (Principal office address MUST BE A STRE | ET ADDRESS) | Lunenburg, MA 01462 | * . | | |
| | | | | | |
| Enter new mailing address, if applicable: | | 269 Arbor Street | | | |
| (Mailing address MAY BE A POST OFFICE | BOX) | Lunenburg, MA 01462 | | | |
| | | | 1 | | |
| B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent: | l/or registered off office address here URS AGENTS I | ; | ecords, <u>enter</u> | the Tame of | |
| New Registered Office Address: | 1540 Glenway D |)rīve | | (A) | -10-Jean- |
| the state of the s | | Enter Florida street | address | 1 | 71 |
| | Tallahassec | S | , Florida ³²³ | 三量回 | Tree. |
| | | City | | Zip Cuda | |
| New Registered Agent's Signature, if changing | Registered Agent: | 1.1 | | | |
| hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as registere the obligations of my position as registering filed to merely reflect a change in the company has been notified in writing of this | er and complete p stered agent as pr registered office a change. | performance of my dut wided for in Chapter address, I hereby confi MANOLA | es, and I am fo 605, F.S. Or, orm that the lim | amiliar with arif this documents the lability | nd |
| | n Chang | ing Registered Agent, Sign | Projective M. V.C. | DIELTA VIKELIE | |

Page 1 of 3

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

| $\mathbf{AMBR} = A$ | Authorized Member | | | |
|---------------------|-------------------|---------|---------------------------|--|
| <u>Title</u> | <u>Name</u> | Address | Type of Action | |
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| ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing: Et if the date inserted in this block does not meet the applicable statutor ument's effective date on the Department of State's records. | ng or more than 90 days after filing.) Pursuant to 605 |
| record specifies a delayed effective date, but not an effect he 90th day after the record is filed. | tive time, at 12:01 a.m. on the earlie |
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Page 3 of 3

Filing Fee: \$25.00