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(Re	equestor's Name)	
(Ad	ddress)	
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(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nam	e)
	·	<i>,</i>
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Certified Copies	ertificates	of Status
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: UNIVERSITY LOFTS, LLC	
(Name of L	imited Liability Company)
	1.00
Dear Sir or Madam:	AFEG THE T
The enclosed Registered Agent/Registered O	office Change and fee(s) are submitted for fiting.
Please return all correspondence concerning .	office Change and fee(s) are submitted for filings this matter to the following:
JONATHAN LEONI	LORIDA ORIDA
(Name of Person)	
UNIVERSITY LOFTS, LLC (Firm/Company)	·····
(Fund Company)	
800 OCALA ROAD, SUITE 300-180	
(Address)	
TALLAHASSEE, FLORIDA 32304	
(City/State and Zip Code)	
For further information concerning this matter	er, please cali:
JONATHAN LEONI	at (850) 339-4201
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following	g amount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	DNIVERSIM LOFTS LLC		
_	(Present Name) (A Florida Limited Liability Company)		
	TIL 25 PALLAHASS		
FIRST:	The Articles of Organization were filed on 7 17105 and assigned Top document number 10500070853		
SECOND:	This amendment is submitted to amend the following:		
	THE SOLE Manying Member and Negistered		
	tigent is NON JONATTHAN LEONI,		
	THE SOLE Managing Member and Negistered typint is NON JONATTHAN LEONI, 200 Ocama Ro. S. Suite 300-180	>	
	TATELAHASSEE 12 32304		
Dated	7/25/07		
	Signature of a member devaluation of a member to the signature of a member		
	Typed or printed name of signee		

Filing Fee: \$25.00