LOWOWA 154

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NOV O 1 2017 J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Meredith Developments, 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:
Tack Metedith
Name of Person
Firm/Company
120 NE 44th Street
Address
City/State and Zip Code imeredit and Zip Code [E-mail/address: (to be used for future annual report notification)
City/State and Zip Code
1:-marVaddress: (to be used for future annual report nonlication)
For further information concerning this matter, please call:
Tack Meredoth at 561 450-5519 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee \& Certificate of Status \$\Bigcup \$Certificate of Status \$\Bigcup \$Certified Copy (additional copy is enclosed) \$\Bigcup \$60.00 Filing Fee. \$\Bigcup \$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

Meredith	ability Company as it now appears on our records.) orida Limited Liability Company)
(Name of the Limited Liz (A Flo	ability Company as it now appears on our records.) orida Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number	ity Company were filed on $02/22/2006$ and assigned 9154
This amendment is submitted to amend the following	g;
A. If amending name, enter the new name of the	limited liability company here:
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET AL	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	Miami, FL 33137
B. If amending the registered agent and/or registered agent and/or the new registered office :	registered office address on our records, <u>enter the name of the new</u> <u>address here</u> :
Name of New Registered Agent:	N/A 120 NE 44th Street Emer Florida street address Miami Florida 33137 City Zip Code
New Registered Office Address:	120 NE 44th Street
_	Miami Florida 33/37
New Registered Agent's Signature, if changing Regist	
I hereby accept the appointment as registered ag	gent and agree to act in this capacity. I further agree to comply with the add complete performance of my duties, and I am familiar with and

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 Changing Registered Agent, Signature of New Registered Agent

accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or. if this document is

MGR = Ma AMBR = 'Au	anager Ithorized Member		
<u>Title</u>	Name	Address	Type of Action
GRM	John L. Wilkerson	4928 NW Flintstone F.	1 rie _{□ Add}
		Port St. Lucie, FL	Remove
		34983	Change
GRM	Eric L. Levin	610 Melaleuca Lane	Add
		Mrami, FL 33137	7 □ Remove
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Filing Fee: \$25.00