# 20064164

(Requestor's Name)	
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PICK-UP WAIT MAIL	-
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(Document Number)	
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# COVER LETTER

ГО:	Registration Se Division of Cor		•	
,	TPG of Flo	rida, LLC		
SUBJEC	CT:	Name of Lim	ited Liability Company	<del></del>
I'he encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
lease re	turn all correspo	ondence concerning this matter	to the following:	
		Luis A. Plasencia		
			Name of Person	
		The Plasencia Group, Inc.		
			Firm/Company	<del></del>
		I N. Dale Mabry Hwy. #10	000	
			Address	<del></del>
		Tampa, FL 33609		
			City/State and Zip Code	<del></del>
		oplasencia@tpghotels.com	to be used for future annual report notifi	tion I
<sup>∓</sup> or furth	er information c	oncerning this matter, please co	•	cation
Orlando	Plasencia		813 9321234 at ()	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed	I is a check for th	ne following amount:		
\$25.0	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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TPG of Florida, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on June 23, 2006 and assigned Florida document number H06000165003 This amendment is submitted to amend the following: 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 ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Dennis Reed	1 N. Dale Mabry Hwy. #1000	
		Tampa, FL 33609	≅ Remove
			Change
MGR	Christopher R. Plasencia	1 N. Dale Mabry Hwy. #1000	Add
		Tampa, FL 33609	☐ Remove
			☐ Change
		<del></del>	Add
			Remove
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fective date, if other than the in effective date is listed, the date m	ust be specific and cannot be prior	to date of filing or more than 90	days after filing.) Pursuant to	605.020
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record specifies a delaye		t an effective time, at	12:01 a.m. on the ea	rlier o
The 90th day after the re	cora is filea.			
August 17	2017			
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	to do	orized representative of a mem		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00