6000090068

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SECRETARY OF STATE
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ReMark Neighborhood Revitalization, LLC.

601 South Fremont Avenue Tampa, Florida 33606

> 813-876-3113 Office 813-871-9202 Fax

July 23, 2014

Florida Department of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: Articles of Amendment

Plan Document No. L06000090068

Dear Sir or Madam:

Enclosed herewith please find the Cover Letter, Articles of Amendment to Articles of Organization of ReMark Neighborhood Revitalization, LLC for the above referenced limited liability company. Also inclosed is our check number 1062 in the amount of \$25.00 made payable to Florida Department of State to cover the cost of the filing fees associated with the Articles of Amdendment.

Please do not hesitate to contact us if we can be of further assistance.

Sincerely,

David S. Faloon Business Manager

Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

ReMark Neighborhood Revitalization, 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:

Christine Major Hicks

Name of Person

ReMark Neighborhood Revitalization, LLC

Firm/Company

601 S Fremont Avenue

Address

Tampa, Florida 33606

City/State and Zip Code

cmajor@henryhickslaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dave Faloon

ູ,813、513-7676

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 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

ReMark Neighborhood Revitalization, I		
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our recor Liability Company)	<u>rds.</u>)
The Articles of Organization for this Limited Liability Compan Florida document number <u>L0600090068</u> .	y were filed on 09/13/2006	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and end with the words "Limited Lia	ability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		191 dy.
(Principal office address MUST BE A STREET ADDRESS)		
		≥# = 11
		Δ <u>Σ</u> ω
Enter new mailing address, if applicable:		333S
• • • • • • • • • • • • • • • • • • • •		3 77
(Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he		ds, <u>enter the name of the new</u>
Name of New Registered Agent:	<u></u>	
New Registered Office Address:		
<u> </u>	Enter Florida street addr	ess
		lorida
	City	Zip Code

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 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:

MGR = Manager AMBR = Authorized Member **Title** Name **Address Type of Action Donald Regar** PO Box 320501, Tampa, FL 33679 **MGRM** Remove □ Add _□ Remove ☐ Remove □ Remove □ Add _□ Remove □ ∧dd _□ Remove

. If amending any other information, enter change(s) here: (Attach additional	sheets, if necessary.)
•	
 	<u>.</u>
-	
Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more the date this document is filed by the Florida Department of State)	(optional) ore than 90 days after
Dated July 28 , 2014 .	
Christin Major ducks	
Signature of a member or authorized representative of a Christine Major Hicks	member
Typed or printed name of cignes	·

Page 3 of 3

Filing Fee: \$25.00

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SECRETARY OF STATE
TALLEAHASSEE, FLORID