LOGOOO 101715

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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

JAN 0 9 2019

S. YOUNG

COVER LETTER

Div	vision of Cor	porations					
EUD IEZT.		TURF CLUB, LLC					
SUBJECT:		Name of Lim	ited Liability Company				
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please retun	n all correspo	ndence concerning this matter	to the following:				
		F. KENNETH TOMEK					
		F. KENNETH TOMEK, C	Name of Person				
		10100 WEST SAMPLE R	Firm/Company D. SUITE 300		FIG	18	
		CORAL SPRINGS, FL 33	Address 065		LAHASSI	DEC 27	
		<u></u> .	City/State and Zip Code		EE, FLORI	27 M 7:05	
Con firethon i	iufamatian a	E-mail address: (to be used for future annual report notifi	cation)		20	
	гн томек	oncerning this matter, please c	954 340-8880				
•	Name o	f Person	at () Area Code Daytime	Telephone Number			
Enclosed is	a check for th	ne following amount:					
□ \$25.00 I	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status		
	Registr	ING ADDRESS:	STREET/COURIE Registration Section				

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PREMIER TURF CLUB, LLC	
(Name of the Limited Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)
The Articles of Organization for this Limited Liability Company were filed on $\frac{10}{10}$ Florida document number $\frac{106000101715}{10000101715}$.	18/2006 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company h	ere:
The new name must be distinguishable and contain the words "Limited Liability Company," the o	_
Enter new principal offices address, if applicable:	<u> </u>
Principal office address MUST BE A STREET ADDRESS)	
	数 2
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
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3. If amending the registered agent and/or registered office address or	our records, enter the name of the ne
registered agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
Enter Flo	rida street address

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>	<u>Address</u>	Type of Action
AMBR	THERESA BERMAN	2944 NEEDHAM COURT DLERAY BEACH, FL 33445	
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			☐ Remove
			Change
			□ Add
			☐ Remove
			Change
			Add
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	12/01/2018
an cfi (ote:	ive date, if other than the date of filing:
e re The	cord specifies a delayed effective date, but not an effective time, at $12:01\ a.m.$ on the earlier of 90 th day after the record is filed.
ated	12/20/18 Nes Bormer
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00