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| (Re | questor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | s of Status |
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| Special Instructions to | Filing Officer: | - |
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Office Use Only



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J. SAULSBERRY EXAMINER

NOV_9 2010

COVER LETTER

| Division of Co | | | |
|-------------------------|--|--|--|
| SUBJECT: Pine | Forest Homes, LLC | | • |
| SUBJECT. | Name of Limi | ted Liability Company | |
| | f Amendment and fee(s) are sul | - | |
| | Carl L. John | ison | |
| | | Name of Person | · · · · · · · · · · · · · · · · · · · |
| | | Firm/Company | _ |
| | | | 52 1 |
| | 4421 NW 39th | Avenue, Bldg. 1, Suite Address | 2010 NOV -8 SECRETARY ALLAHASSE |
| | Gainesville, | FL 32606 | I ASS |
| | | City/State and Zip Code | 1.22 |
| | E-mail address: (| to be used for future annual report notifical | |
| For further information | concerning this matter, please | call: | 10 A |
| Name | of Person | at () Area Code & Daytime T | elephone Number |
| Enclosed is a check for | the following amount: | | |
| \$25.00 Filing Fee | \$30.00 Filing Fee & Certificate of Status | \$555.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| MAI | LING ADDRESS: | STREET/COURIE | R ADDRESS: |

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Pine Fore | st Homes, LLC | | |
|--|-----------------------------|---|--|
| (Name of the Limited Liab (A Flor | ility Company as it now ap | pears on our records.) | " |
| (A Flor | da Limited Liability Compar | ry) | |
| The Articles of Organization for this Limited Liability | y Company were filed on | 05/23/2007 | _ and assigned |
| Florida document numberL07000054890 | | | |
| Tiorida document number | ' | | |
| | | | |
| This amendment is submitted to amend the following | 3: | | |
| A. If amending name, enter the new name of the | limited Hability company | here. | |
| A. If afficienting hame, enter the new figure of the | minuco nability company | nere. | |
| | | • | |
| The new name must be distinguishable and end with the "L.L.C." | words "Limited Liability Co | ompany," the designation "LL | C" or the abbreviation |
| Enter new principal offices address, if applicable: | | | |
| (Principal office address MUST BE A STREET AL | DDRESS) | | 20 0 E |
| | | | F.6 6 |
| | | | }} |
| | | | A Y |
| Enter new mailing address, if applicable: | | | SE 00 |
| · · · | | | (1) |
| (Mailing address MAY BE A POST OFFICE BOX | | | <u> </u> |
| | | | |
| | | | 음금 5 |
| B. If amending the registered agent and/or re | egistered office address | on our records, enter the | name of the new |
| registered agent and/or the new registered office | address here: | <u></u> | |
| | | | |
| | | | |
| Name of New Registered Agent: | | | |
| | | | |
| New Registered Office Address: | | 7 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| • | | Enter Florida street addre | :22 |
| | | Florida | |
| _ | 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 608, 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 Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|---|---|---|---------------------|
| MGRM | Khurana, Michele | 18107 NW CR 239 Alachua, FL 32615 | Add Remove |
| MGRM | Khurana, Nilacala | 413 NW 3rd Ave Gainesville, FL 32601 | Add Remove |
| MGRM | Khurana, Naveen | 18107 NW CR 239 Alachua, FL 32615 | Add X Remove |
| *************************************** | | | Add Remove |
| | | | Add Remove |
| | | | Add |
| D. If ame | nding any other information, enter char | nge(s) here: (Attach additional sheets, if necess | |
| _ | Article VI is added to read | : The Limited Liability Company | shall be 0 |
| _ | | The sole asset of the Company s | |
| _ | the apartments knowm as Pi | ne Forest Homes in Gainesville, | Alachua & |
| _ | County, Florida. | | PR TO |
| Dated | November 5, 2010 , | ······································ | J:54 |
| | Signature of a mem | ber or authorized representative of a member | · . |
| | | URANA PRESIDENT, | NINFALL CORPORATION |

Page 2 of 2

Filing Fee: \$25.00