

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : GARTNER BROCK & SIMON
Account Number : 19990000204
Phone : (904) 399-0870
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
NORMANDY RETAIL INVESTORS, LLC

Certificate of Status	1
Certified Copy	1
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G. MCLEOD

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EXAMINER

RECEIVED

09 DEC 17 AM 11:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 DEC 17 AM 11:12

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

NORMANDY RETAIL INVESTORS, 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 January 14, 2008 and assigned Florida document number L08000004494.

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 end with 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)

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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

Florida

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

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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:

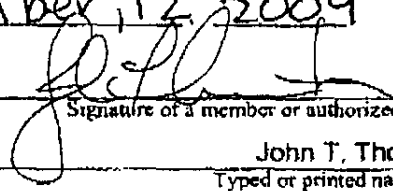
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Mgr	Skyline Realty Services, Inc	751 Oak Street Suite 600 Jacksonville, Florida 32204	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Mgr	Thomton & Associates, LLC	4196 Herschel Street Suite 2 Jacksonville, Florida 32210	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated

December 12, 2009


Signature of a member or authorized representative of a member

John T. Thornton

Typed or printed name of signee

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