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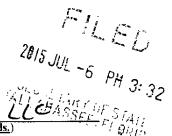
2015 JUL - 6 PN 3: 32

K.SALY EXAMINER JUL -8 2015

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Land South Management
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:
Meghan West
Land South
Firm/Company
P.U. DOX 1595 Address
I akaland A RESSOT
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mochan 1, 1087 318103, 1007-9500
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 Certified Copy (additional copy is enclosed) \$55.00 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



The Articles of Organization for this Limited Liability Company were filed on 3/27Florida document number 6800003/43/ 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 Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Ma AMBR = Au	nager thorized Member		
<u>Title</u> MGR	<u>Name</u> Justin L. Harden	Address 4030 S. Pipkin Rd	Type of Action
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Effective date, if other	er than the date o	f filing:		(opti	onal)
I an effective date is listed Note: If the date insert	I, the date must be spec ted in this block doc	cific and cannot be p es not meet the ap	prior to date of filing or plicable statutory fili	more than 90 days after ing requirements, thi	filing.) Pursuant to 605.0207 s date will not be listed as
document's effective d	ate on the Departme	ent of State's reco	ords.		
ne record specifies The 90th day aft			not an effective	time, at 12:01 a	a.m. on the earlier of
The 90th day are	er the record is	mea.			
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Page 3 of 3

Filing Fee: \$25.00