1209000035128

THUMAS C. WILKINSON				
(Requestor's Name) 7.0, Box 138 (Address)				
(Address)				
MARIAND, FN (Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



800282303918

02/19/16--01003--010 **50.00

ID ACKNOWLEDSE

RECEIVED
REPART STATE
16 FEB 19 AH II: 26

SECRETALL OF SIME



FEB 1 9 2016

3 MASON

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TALL GRASS CAPITAL PAR	TNERS. LLC		主義	69
Name of Limited Liability Comp	•	rs on our records		(2)
The Articles of Organization for this Limited Liability C	Company were filed on	<u> 4-10</u>	-0939 -0939	AM III: 36
This Amendment is submitted to amend the following:				
A. If amending name, enter the new name of th	e limited liability cor	mpany here:		
TALL GRASS MANAGEMENT PAR				
The new name must be distinguishable and end with the or the abbreviation "L.L.C."	words "Limited Liabili	ity Company," the	e designation ""L	LC"
Enter the new principal offices address, if applicable (Principle office address MUST BE A STREET ADDR		ll Castle Ha ro Beach, FL		.e
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered agent and/or the new registered			enter the name o	f the
Name of New Registered Agent:	Thomas C.			
New Registered Office Address:		rson Street Florida Street Ad	dress	
	Maria	nna F	lorida 32440	6
	City		Zip Cod	le

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 ny 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

THOMAS C. WILKINSON

Page 1 of 2

If amending the Managers of Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

<u> </u>	<u>Name</u>	Address	Type of Action
		Remove	
			Add Remove
			Damaya
			Remove
D. If 	amending any other information,	enter change(s) here: (Attach addition	nal sheets if necessary.)
_			

Signature of a member or authorized representative of a member THOMAS C. WILKINSON

XXXX XXX XXXXX

Typed or printed name of signee

PAGE 2 OF 2

Filing Fee: \$25.00

SECRETATE OF SAME

