L100001679a

| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ad | dress) | _ |
| (Ad | dress) | _ |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | isiness Entity Nar | me) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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SECRETARY TO SECRETARY

FEB 11 2015 S. YOUNG

COVER LETTER

| | gistration S& ision of Corp | | | |
|----------------|--------------------------------|--|---|--|
| SUBJECT: | ABLAR Y | 'AMATO, LLC | | |
| SUBJECT: | | Name of Limi | ited Liability Company | . |
| The enclosed | d Articles of | Amendment and fee(s) are sub- | mitted for filing | |
| | | idence concerning this matter | - | |
| i icase returi | i an correspon | defice concerning this matter | to the following. | |
| | | FREDERICK GALIS | ON | |
| | | | Name of Person | |
| | | GP REAL ESTATE | | J. 3 |
| | | | Firm/Company | |
| | | 2415 NW 31ST STR | EET | 图 8 7 |
| | | | Address | B-2 PD |
| | | BOCA RATON, FL 3 | 33431 | - 10以 単 U - 10万 年 |
| | | 5011001100110 | City/State and Zip Code | ूना द्वा |
| | | _ | ONPROPERTIES.COM to be used for future annual report notific | ation) |
| For further is | nformation co | oncerning this matter, please ca | | |
| FREDER | RICK GALI | SON | 954 592-6257 | |
| | Name of | Person | at () Area Code Daytime ` | Telephone Number |
| | | | | |
| | | e following amount: | | |
| \$25.00 F | Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | | NG ADDRESS: ation Section | STREET/COURIE Registration Section | R ADDRESS: |

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| ABLAR YAMATO LLC | · Co | |
|--|---|--|
| (A Florida | ty Company as it now appears on our records.) a Limited Liability Company) | |
| The Articles of Organization for this Limited Liability C Florida document numberL10000016792 | Company were filed on 02/12/2010 | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the lim | ited liability company here: | |
| The new name must be distinguishable and end with the words "Lin | mited 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 ADDI | RESS) | en e |
| | | |
| | | -2 I |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | 112 July 1993 |
| | | 중류 성 |
| | | , |
| B. If amending the registered agent and/or regis registered agent and/or the new registered office add | | enter the name of the no |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street address | |
| | , Flor | |
| | 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 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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|--------------------------------|----------------------|--|
| MMBR | FREDERICK GALISON | 2415 NW 31ST STREET | □ Add |
| | | BOCA RATON, FL 33431 | Remove |
| MGR | FREDERICK GALISON | 2415 NW 31ST STREET | Add |
| | INTER UIVOS TUST 12/05/2014 | BOCA RATON, FL 33431 | □ Remove |
| | • | | SE TO THE TOTAL PROPERTY OF THE PROPERTY OF TH |
| | | | Add |
| | | | 1974 5 |
| | | | ☐ Add |
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| | | | Remove |

| NE | ing any other information, enter change(s) here: (Attach additional sheets, if necessary.) WAUTHORIZED MEMBER: |
|----------------------------|---|
| FR | EDERICK GALISON INTER VIVOS TRUST, 12/05/2014 |
| | |
| <u> </u> | |
| | |
| e effectiv | date, if other than the date of filing: |
| he effectiv he date thi | ve date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after |
| he effective the date the | ve date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after |
| The effective | re date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after is document is filed by the Florida Department of State) |

Page 3 of 3

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Filing Fee: \$25.00