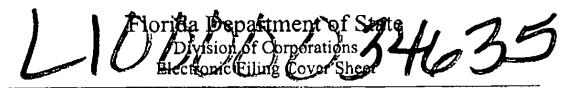
7/23/2018

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Division of Corporations



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BAND LAW GROUP, Pt.

Account Number : 120090000020

Phone

: (941)917-0505

Fax Number

: (941)917-0506

annu	ne email address for this bus al report mailings. Enter on	iness entity to be use ly one email address pl	d for furties
LL	C AMND/RESTATE/COR PHYLLIS REALTY	•	ESICIA FOR TO TO
#FT.1 10.1 20.1	Certificate of Status	0	

04 Page Count S25.00 Estimated Charge

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PHYLLIS REALTY HOLDINGS, L			_
(Name of the Limite	A Florida Limited I	ny as it now appears on our i Liability Company)	records.)
The Articles of Organization for this Limited Lia Florida document number L10000034635	bility Company	were filed on 03/30/2010	and assigned
This amendment is submitted to amend the follow	wing:		12 6
A. If amending name, enter the new name of			
The new name must be distinguishable and contain the wo	rds "Limited Liabil	ity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	2893 Wynfair Drive	
(Principal office address MUST BE A STREET	(ADDRESS)	Marietta, GA 30062	- OF 6
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2893 Wynfair Drive Marietta, GA 30062	
B. If amending the registered agent and/or registered agent and/or the new registered off	r registered of lee address her	ffice address on our re e:	cords, enter the name of the new
Name of New Registered Agent:	Gregory S. Ba	ind, Esq.	
New Registered Office Address:	One South School Avenue, Suite 500		
ATVICAN DESIMARY DESIMARY	<u> </u>	Enter Florida street	address
	Sarasota		_, Florida <u>FL 34237</u>
		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

(((H18000211879 3)))

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M AMBR = A	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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(If an effective date is in Note: If the date ind document's effective fithe record specific	ther than the date of sted, the date must be spec- serted in this block does e date on the Departments ies a delayed effec- after the record is	ific and cannot be prior is not meet the applicant of State's records.	iole statutory filing rec	uirements, this date t	All liot oc hates t
Dated		2018			
		bo	R/		
	Signatu	re of a member ar sutho	rized representative of a	momber	-

Page 3 of 3

Filing Fee: \$25.00