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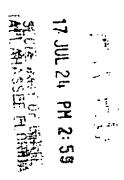
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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	MARY A. EAVES SE	NIOR LIVING FACILI	TY, LLC	
	Name of Lim	ited Liability Company		
The continued Aminton	- F. A	itted for Slims		
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.		
Please return all corre	spondence concerning this matter	to the following:		
		Paul A. Tutwiler		
		Name of Person		
	NORTHWEST	JACKSONVILLE CO	MM. DEV. CORP.	
		Firm/Company		
	341	6 Moncrief Road, Suite	200	
		Address		
		Jacksonville FL 3220	9	
	·	City/State and Zip Cod	e	
		ptutwiler2003@yahoo.	com	
	E-mail address: (to be used for future annua	al report notification)	
For further informatio	n concerning this matter, please ca	all:		
Paul	A. Tutwiler	904	598-9196	
		at ()		
Nam	e of Person	Area Code	Daytime Telephone Number	
Enclosed is a check fo	r the following amount:			
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee Certified Copy	: & ■ \$60.00 Filing Fee, Certificate of Status	&
		(additional copy is e	nclosed) Certified Copy (additional copy is enclosed)	sed)
			•	
MA	ILING ADDRESS:	STRE	ET/COURIER ADDRESS:	
	istration Section		ation Section	
	sion of Corporations		n of Corporations	
	Box 6327 ahassee, FL 32314		Building xecutive Center Circle	
1 411	THE PROPERTY OF THE PROPERTY O		ssee, FL 32301	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

17 JUL 24 PH 2:5\$

MARY A. EAVES SENIOR		G FACILITY, LLC	of emer of Shifting Massee Florida
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as itino	ow appears on our records.	LAMINSSEE FLORIDA
The Articles of Organization for this Limited Liability Company	were file	ed on April 9, 2010	and assigned
Florida document number 40000039608			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility con	pany here:	
NORTH POINT II DE	VELOP	MENT LLC	
The new name must be distinguishable and contain the words "Limited Liabil	ity Compa	any," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	3416 N	Moncrief Road, Suite 200	
(Principal office address MUST BE A STREET ADDRESS)	Jackso	nville FL 32209	
- Megawa pres www.com Macon Bo Honeson Monthson			
			
Enter new mailing address, if applicable:	3416 N	Moncrief Road, Suite 200	
• • • •	Jackso	nville FL 32209	
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		dress on our records, <u>enter</u>	the name of the new
Name of New Registered Agent:	<u> </u>	 -	
New Registered Office Address:		6 Moncrief Road, Suite 200	
	Enter Florida street address		
	acksonvi	ille, Florida	32209
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agreprovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as plaing filed to merely reflect a change in the registered office company has been notified in writing of this change.	perform providea address	ance of my duties, and I am for in Chapter 605, F.S. Or, I hereby confirm that the lim	amiliar with and if this document is nited liability
If Chan	iging Reg	Istered Agent, Signature of New Res	zistered Agent

MGR = N	d from our records:		
AMBR = A	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Remove
			Change
			
		·	Remove
			Change
			Add
			Remove
		-	Change
			Remove
			Change
		-	
			Remove
			Remove
			□ Change

amend	ing any other information, enter change(s) here: (Attach additional shee.	is, if necessary.)
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		24 R558
		<u> </u>
		2: 5
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fective	date, if other than the date of filing:	(optional)
ote: If t	ve date is listed, the date must be specific and cannot be prior to date of filing or more than 90 the date inserted in this block does not meet the applicable statutory filing requirent's effective date on the Department of State's records.	days after filing.) Pursuant to 605.0207 ments, this date will not be listed as
	d specifies a delayed effective date, but not an effective time, at 0th day after the record is filed.	12:01 a.m. on the earlier of
ated	14y 21 2017	
	Signature of a member or authorized representative of a memb	oer
	Paul A. Tutwiler	
	Typed or printed name of signee	
	Page 3 of 3	