

L10000074280

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JUN 02 2015

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gainesville Real Estate Two, LLC
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:

Allison Ables

Name of Person

Gainesville Real Estate Two, LLC

Firm/Company

2835 SW 91st St. Ste. 300

Address

Gainesville, FL 32608

City/State and Zip Code

aables@allisonables.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Allison Ables

Name of Person

at (352)

Area Code

514-7825

Daytime Telephone Number

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Enclosed is a check for the following amount:

☒ \$25.00 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)

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**

Gainesville Real Estate Two, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 07/14/2010 and assigned Florida document number L10000074280

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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)

274 NW 137th Drive

Suite 100

Newberry, FL 32669

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

274 NW 137th Drive

Suite 100

Newberry, FL 32669

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:

Constance A. Ables

New Registered Office Address:

274 NW 137th Drive, Ste 100

Enter Florida street address

Newberry

City

Florida 32669

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. Only this document 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

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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 = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Blair M. Janes	274 NW 137th Drive	<input checked="" type="checkbox"/> Add
		Ste. 100	<input type="checkbox"/> Remove
		Newberry, FL 32669	<input type="checkbox"/> Change
MGR	Michael Lee Johnson, Jr.	2835 SW 91st St.	<input type="checkbox"/> Add
		Ste. 300	<input checked="" type="checkbox"/> Remove
		Gainesville, FL 32608	<input type="checkbox"/> Change
MGR	Constance A. Ables	274 NW 137th Drive	<input type="checkbox"/> Add
		Ste. 100	<input type="checkbox"/> Remove
		Newberry, FL 32669	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)


(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated May 26th, 2015.


Signature of a member or authorized representative of a member

Constance Alison Alores
Typed or printed name of signee

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