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(((H10000230959 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : AGI REGISTERED AGENTS, INC.

Account Number : I20000000205 Phone

: (305)416-6800

Fax Number

: (305)416-6811

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SEA RANCH D202, LLC

Certificate of Status	0
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OCT 2 2 2010

EXAMINER

.. ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF Н100002309593

2010 OCT 21 AM 7: 33 SECRETAR (DE STATE TALLAHASSEE, FLORIDA

		(Mr. m.
SEA	RANCH D202, LLC	
(Name of the Limited Lia	bility Company as it now appride Limited Liability Compan	cars on our records.)
(A Piol	nua cimited ciaomity compan	y)
The Articles of Organization for this Limited Liabili	ity Company were filed on _	October 6, 2010 and assigned
Florida document numberL1000010488		
Florida document number	 *	
This amendment is submitted to amend the followin	ıg:	•
A. If amending name, enter the new name of the	limited liability company	<u>here</u> :
SE	EA RANCH 202, LLC	
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Cor	mpany," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	:: 	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO)	<u> </u>	
	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		on our records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
		Enter Florida street address
_		, Florida
_	City	Zip Code
New Registered Agent's Signature, if changing Regi	stered 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 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

Page 1 of 2

MGR = Ma MGRM = N	nager Managing Member		
<u>l'itle</u>	Name	Address	Type of Action
			□ Pamasa
			Remove
			Remove
			T n
·····			Add Remove
D. If amen	ding any other information, en	er change(s) here: (Attach additional shee	ets, if necessary.)
-			2018 OCT
— —	October 21	2010	2.1 M 7:34 ASSEE, FLORID
Dated	OCIODBI 21	2010	JOHN TO THE SECOND

Page 2 of 2

Filing Fee: \$25.00