L 110000 43110

(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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J. HARRIS

850-205-8842

FAIRWAY MEMORIAL PRO	OPERTIES, LLC	L11000043110	
**	**PLEASE FILE FIRST***		
() Nonprofit	(X) Amendment	() Merger	
()Domestic Corporation	Name Change		
() I inside d December 1	() Dissolution/Withd	drawal () Mark	
() Limited Partnership () LLC	() Reinstatement () Annual Report	() Other	
() LEC	() Allital Report	() Other	
	() Name Registratio	an	
(X) Certified Copy	() Fictitious Name		
Amendment	<u> </u>	() CUS	
	() Photocopies	V	
(x) Walk In		() After 4:30	
() Mail Out	() Will Wait	(x) Pick Up	
		•	
Name		-	
Availability	6/15/2015	Order#	
Document		9586422	
Examiner	KM		
Updater		Ref#:	
Verifier			
W.P. Verifier			
		Amount: \$	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FAIRWAY MEMORIAL PROPERTIES, LLC
(Name of the Limited Liability Company as it now appears on our records.)

(A rionda Limii	ieu Liability Company	"		
The Articles of Organization for this Limited Liability Compa	any were filed on	April 11, 2011	and ass	igned
Florida document number <u>L11000043110</u>				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited I	iability company	here:		
FAIRWAY MEMORIAL CAPITAL, LLC				
The new name must be distinguishable and contain the words "Limited L	iability Company," th	e designation "LLC" or th	ne abbreviation "L.	L.C."
Enter new principal offices address, if applicable:			77.54	<u>5</u>
(Principal office address MUST BE A STREET ADDRESS	2			<u></u>
			1 - 1	12
				9 1
Enter new mailing address if annihables			rm.g.	P: -
Enter new mailing address, if applicable:				<u>ب</u>
(Mailing address MAY BE A POST OFFICE BOX)				<u></u>
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		on our records, <u>en</u>	ter the name	of the nev
Name of New Registered Agent:				
New Registered Office Address:				<u>. </u>
	Enter F	lorida st reet address		
		, Florida		
	City		Zip Code	
New Registered Agent's Signature, if changing Registered Age	ent:			
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and compl accept the obligations of my position as registered agent being filed to merely reflect a change in the registered off company has been notified in writing of this change.	lete performance as provided for in	of my duties, and I d Chapter 605, F.S.	ım familiar wit Or, if this docu	h and ment is
			v Registered Ager	

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>	Name	Address	Type of Action
MGR	Ralph E. Little, III	22 Pearl Street, Noank, CT 06355	
			Remove
			☐ Change
MGR	Littlestone Memorial Properties, LLC	22 Pearl Street, Noank, CT 06355	■ Add
			☐ Remove
	•		Change
			Add
			Remove
		<u>. </u>	Change
			Add
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Typed or printed name of signee The date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list nearly effective date on the Department of State's records. Cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earliest effective the record is filed. June 1/1 2015 Signature of a member or authorized representative of a member Ralph Little Typed or printed name of signee					
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Page 3 of 3	cord specifies e 90th day afte	Signatu	JSI GC		
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