Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000313033 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FLAGLER DEVELOPMENT GROUP, LLC

Account Number : I20020000144

Phone : (305)520-2344

Fax Number

: (305)520-2400

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

Email	Address:	 _	 	 	 	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FLAGLER DEVELOPMENT COMPANY, LLC

Certificate of Status	0
Certified Copy	. 0
Page Count	04
Estimated Charge	\$25.00

850-617-6381

11/29/2018 10:02:08 AM PAGE 1/001 Fax Server



November 29, 2018

FLORIDA DEPARTMENT OF STATE

FLAGLER DEVELOPMENT COMPANY, LLC Division of Corporations

SUBJECT: FLAGLER DEVELOPMENT COMPANY, LLC

REF: L11000074983

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

The form you submitted is for a FOREIGN LLC, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, blease call (850) 245-6900.

Stacy Prather Regulatory Specialist III FAX Aud. #: E18000313033 Letter Number: 018A00024347

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO: Registration Sec Division of Corp			
	elopment Company, LLC		
SUBJECT:	Name of Limit	ed Liability Company	
The enclosed Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspon	ndence concerning this matter to	o the fellowing:	
	Jessica Perez		
		Name of Person	
		Firm/Company	
	117 NE 1st Avenue, 11th F	loor	
	Miami, FL 33132	Address	
	kolleen.cobb@feci.com	City/State and Zip Code	2016 NOV 30
	E-mail address: (t	o be used for future annual report notification)	NO NO
For further information c	oncerning this matter, please co	ll:	30 30 3531
Jessica Perez		305 520-2366 at ()	
Name o	of Person	Area Code Daytime Teleph	NOV 30 AM 9: 34 NOV 30 AM 9: 34 NOV 30 AM 9: 34
Enclosed is a check for the			
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	3 \$60.00 Filing Fee, Certificate of Status & Certified Copy (udditional 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

Flagler Development Company, LI	LC .		
(Name of the Limi	ted Liability Company as it now a (A Florida Limited Liability Comp	ppgars un our records.) any)	
The Articles of Organization for this Limited L Florida document number L11000074983	hability Company were filed o	on 6/27/2011 and assigned	
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liability compa	nv here:	
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 appli-	cable:		
(Principal office address MUST BE A STREE			
(FARCIPAL Office unaress NOST BE ASTREE			
			Ţ-
			ΓΥ.
Enter new mailing address, if applicable:			}
(Mailing address MAY BE A POST OFFICE	BOX		<u> </u>
		<u> </u>	
B. If amending the registered agent and registered agent and/or the new registered of		ss on our records, enter the name of the	e new
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:	117 NE 1st Avenue, 11th Fl	oor	
Von Vestamen o Inter	Ent	er Florida street address	•
	Miami	, Florida ³³¹³²	
	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 fumiliar 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

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>	Address	Type of Action
VP 	Snyder, Marshall Bruce	117 NE 1st Avenue, 11th Floor	
		Miami, FL 33132	■ Remove
			☐ Change
VP	Anderson, Mauricio H.	117 NE 1st Avenue, 11th Floor	= Add
		Miami, FL 33132	
		· ·	Remove
			□ Change
 .			·
			Residence NO
			0.00 0.00 1.00 1.00 1.00 1.00 1.00 1.00
			Signature Regione
			□ Change
			Add
			□ Remove
			☐ Remove
			□ Change

<u> </u>		
		
· · · · · · · · · · · · · · · · · · ·		
		<u>2</u> ⋅ 28
		VON CONTRACT
		္တန္တို့ မွ
		=5
		- 声音
		<u> </u>
		<u>@</u> 2
ctive date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date. If the date inserted in this block does not meet the applicable timent's effective date on the Department of State's records.	(option:	al) ng.) Pursuant to 605.0
thich schoolive care on the Department of Danie 5 version		a on the parlier
record specifies a delayed effective date, but not ar	effective time, at 12:01 a.n	1. On the carrier
record specifies a delayed effective date, but not ar The 90th day after the record is filed.	effective time, at 12:01 a.n	i. On the earner
record specifies a delayed effective date, but not ar The 90th day after the record is filed.	effective time, at 12:01 a.n	1. On the earner

Page 3 of 3

Filing Fee: \$25.00