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2011 NOV -1 RM 2: 29
SECRETARY OF STATE
FALLAHASSEE, FLORIDA

2.7 W3 1- AON 110

C. LEWIS

NOV 2 2011

EXAMINER

COVER LETTER

TO: Registration Sect Division of Corpo	ion orations *** **		ч.		
SÜBJECT:	MEGA Gair	nesville Group, LLC	*.1		
	Name of Lim	ited Liability Company			
The enclosed Articles of Ar	mendment and fee(s) are su	bmitted for filing.	•		
Please return all correspond	lence concerning this matte	r to the following:			
		Gail B. Kelly			
		Name of Person			
	MEG	A Gainesville Group, LLC			
		Firm/Company			
	11	425 N. Dale Mabry Hwy			
		Address			
	Tampa, FL 33618				
		City/State and Zip Code			
	gailb	@apartmenthunters.com (to be used for future annual report not	ification)		
For further information con			mount		
	l B. Kelly	at (_813 <u>)</u>	769-5542		
Name of P	erson	Area Code & Dayti	me Telephone Number		
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 enclose	\$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**

FILED

			TOTA MAN	二月 間 2: 29
ME	GA Gainesv	ille Group, LLO	SECRETA	WY DE STATE
ME (Name of the Limite) (√	d Liability Compa A Florida Limited	i <mark>ny as it now appears</mark> Liability Company)	on our regords	SSEE, FLORIDA
The Articles of Organization for this Limited I		were filed on	9/28/2011	and assigned
Florida document numberL1100011	<u>1327 </u>			
•				
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name o	of the limited liab	ility company here	:	
		<u> </u>		
The new name must be distinguishable and end wi"L.L.C."	ith the words "Lim	ited Liability Compan	y," the designation "I	LC" or the abbreviation
Enter new principal offices address, if applic	cable:	3210 SW 40th	Blvd	
(Principal office address MUST BE A STREI	ET ADDRESS)	Suite A1		
		Gainesville, Fl	_ 32608	
Enter new mailing address, if applicable:		11425 N. Dale	Mabry Hwy	
(Mailing address MAY BE A POST OFFICE BOX)		Tampa, FL 33	618	
B. If amending the registered agent and/ registered agent and/or the new registered o			r records, <u>enter t</u>	he name of the new
Name of New Registered Agent:	Gail B. Kelly	/		
New Registered Office Address:				
		Ente	r Florida street addi	ress
			, Florida	
		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 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

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR/= Marrager

MGRM = N	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Donald G Young, Jr	32210 SW 40th Blvd Suite A1 Gainsville, FL 32608	☐ Add ☐ Remove
MGRM_	MEGA Tampa Group, LLC	11425 N. Dale Mabry Hwy Tampa, FL 33618	✓ Add ☐ Remove
<u>P</u>	Mark A. Berry	4808 Centerbrook Court Tampa, FL 33618	✓ Add Remove
<u>CFO</u>	Gail B. Kelly	4023 McLane Drive Tampa, FL 33610	✓ Add Remove
<u>VP</u>	Linda L. Sanchez	12307 Forest Highlands Drive Dade City, FL 33525	☑Add □ Remove
D. If amend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if necessar	Add Remove
	FEI Nu. 36-471	1750	
_			FILE 2011 NOV -1 SECRETARY
Dated <u>/0/.</u>	28/11 Signature of a member	Lely er of authorized representative of a member	E. FLORIDA
	2 Signature of a memor	Gail B. Kelly	
	Турес	d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00