

#L11000140177

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2013 OCT 15 PM 12:11
TO ACKNOWLEDGE
SURRENDER OF FILMS

FILED
13 OCT 15 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
OCT 16 2013

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Tallahassee 223 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:

John T. Burnette

Name of Person

Tallahassee 223, LLC

Firm/Company

311 E. Jennings Street

Address

Tallahassee, FL 32301

City/State and Zip Code

cmusgrove@beanteam.com

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

For further information concerning this matter, please call:

Marsha Follmar

Name of Person

at (**850**) **521-5808**

Area Code & Daytime 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 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**

TALLAHASSEE 223 LLC

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

FILED
13 OCT 15 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 12/14/2011 and assigned
Florida document number L11000140177.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and end with 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)

Tallahassee 223, LLC

311 E. Jennings Street

Tallahassee, FL 32301

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Tallahassee 223, LLC

311 E. Jennings Street

Tallahassee, FL 32301

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:

RE22 LLC

New Registered Office Address:

311 E. Jennings Street

Enter Florida street address

Tallahassee

City

, Florida 32301

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

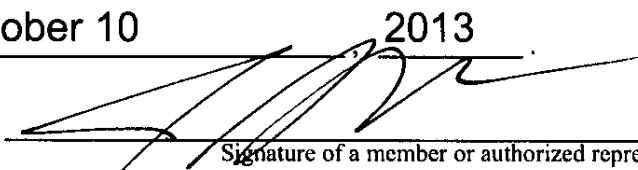
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Seth M Weinstein	6082 Vista Linda LA	<input type="checkbox"/> Add
		Boca Raton, FL 33433	<input checked="" type="checkbox"/> Remove
MGRM	John T. Burnette	311 E. Jennings Street	<input checked="" type="checkbox"/> Add
		Tallahassee, FL 32301	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

Dated October 10 2013



Signature of a member or authorized representative of a member

John T. Burnette

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00