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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 953 NORTH MERCY DRIVE, LLC

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June 2, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

953 NORTH MERCY DRIVE, LLC P.O BOX 540024 ORLANDO, FL 32854

SUBJECT: 953 NORTH MERCY DRIVE, LLC

REF: L12000108201

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SECRETARY OF STATE
TALLAHASSEE, FLORID

P.O BOX 6327 - Tallahassee, Florida 32314

(((H15000130768 3))) ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

953 NORTH MERCY DRIVE, LLC		
(Name of the Limited Liabli (A Plorid	lty Company as it now appears on our records in Limited Liability Company)	<u>r)</u>
The Articles of Organization for this Limited Liability (Company were filed on 8/22/2012	and assigned
Florida document number L12000108201	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
1253 MERCEDES PLACE, LLC		
The new name must be distinguishable and contain the words "Lin	nited 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 ADD.	RESS)	7' 70
Enter new mailing address, if applicable:		V 1
(Mailing address MAY BE A POST OFFICE BOX)		
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		S
B. If amending the registered agent and/or registered agent and/or the new registered office add	stored office address on our records dress here:	, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres:	y
		orida
	City	Zip Code
New Registered Agent's Signature, if changing Registers	ed 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 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

Page 1 of 3

If amendin	g Authorized Person(s) authorized I from our records:	(((H15000130768 3))) to manage, <u>enter the title, name, an</u>	d address of each person being added
MGR = N AMBR = A	Ianager Authorized Member		
Title	<u>Name</u>	Address	Type of Action
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			☐ Remove
			☐ Change
			□ Remove
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Page 2 of 3

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. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
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the record specifies a delayed effective date; but not an effective time, at 12:01 a.m. on) The 90th day after the record is filed.	the earlier of:	
Dated June 1 2015		
· ·		
Signature of a member or authorized representative of a member	+ 	
Comment		
JAMES C. HARTMAN	.	
Typed or printed name of signee		

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