## L/2000/09083

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Merger W Mare Thers 419115 De

## COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: FALL RIDGE UNIT HOLDINGS LLC
Name of Surviving Party
The enclosed Certificate of Merger and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
LOUIS S WELTMAN
Contact Person
LOSOWE CAPITAL, INC
Firm/Company
6615 W. BOYNTON BRACH BLUD, STE 341
Address
BOYNTON BRACH, FL 33437  City, State and Zip Code
City, State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail address. (to be used for future annual report nothication)
l I
For further information concerning this matter, please call:
Louis S WELTMAN at (561) 509-8786
Name of Contact Person Area Code Daytime Telephone Number
Certified copy (optional) \$30.00
STREET ADDRESS: MAILING ADDRESS:
Amendment Section Amendment Section
Division of Corporations  Division of Corporations
Clifton Building P. O. Box 6327 This have a Fig. 22214
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

CR2E080 (2/14)

## Articles of Merger For Florida Limited Liability Company

The following Articles of Merger is submitted to merge the following Florida Limited Liability Company(ies) in accordance with s. 605.1025, Florida Statutes.

Name

Jurisdiction

Form/Entity Type

HIGHLAND CAND COMPANY CCC GEORGIA

Linited Circles. Ly Co.

SECOND: The exact name, form/entity type, and jurisdiction of the surviving party are as follows:

Name

Jurisdiction

Form/Entity Type

Linited Circles. Ly Co.

SECOND: The exact name, form/entity type, and jurisdiction of the surviving party are as follows:

Name

Jurisdiction

Form/Entity Type

[All Ridge unit Holder use Furtion Circles.]

THIRD: The merger was approved by each domestic merging entity that is a limited liability company in accordance with ss.605.1021-605.1026; by each other merging entity in accordance with the laws of its jurisdiction; and by each member of such limited liability company who as a result of the merger will have interest holder liability under s.605.1023(1)(b).

<u>FOUI</u>	RTH: Please check one of th	e boxes that	apply to survivi	ng entity: (if applicable)		
X	This entity exists before the organic record are attached.	merger and	is a domestic fil	ing entity, the amendmen いこと みのさいののだい	t, if any to its イカナみ	public HEO
	This entity is created by the	merger and	is a domestic fil	ing entity, the public orga	unic record is	attached.
	This entity is created by the limited liability partnership,				inership or a d	domestic
	This entity is a foreign entity state. The mailing address 605.0117 and Chapter 48, F	to which th	e department ma			
					-	
under SIXT	H: This entity agrees to pay as ss.605.1006 and 605.1061-60  H: If other than the date of filthan 90 days after the date this	5.1072, F.S ling, the del s document	ayed effective do	ate of the merger, which orida Department of State	cannot be price:	or to nor
SEVE	ENTH: Signature(s) for Each			***************************************	<del>3</del> √	<del>) T</del> C
Name	of Entity/Organization:	-	Signature(s):	Nar	ped or Printed me of Individ	
H 14	HLAND LAND COMPAN	1	Jamos 1	water Lon	us s. wa	ELTMAN
FAU	LIDLE WUIT HOLDING	<u>, u c</u>	-forms 5 1	Lo Lo	W. T. W.	ELTMAN
Corpo	rations:			President or Officer		
Florid Non-F	al partnerships: a Limited Partnerships: lorida Limited Partnerships: ed Liability Companies:	Signature Signature Signature		ner		
Fees:	For each Limited Liability C For each Limited Partnership For each Other Business Ent	o: `	\$25.00 \$52.50 \$25.00	For each Corporation: For each General Part Certified Copy (option	nership:	\$35.00 \$25.00 \$30.00

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FALL ROGE	MHULL HAMININ	6,5 LLC
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our re Lisbility Company)	cords.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L12006169083</u> .	were filed on <u>Augus 7</u>	24, 2012 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab		<i>r</i>
HIGHLAND L. AND The new name must be distinguishable and end with the words "Limited Lial	bility 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)	6615 W. Boy.	TON BEALL BLV.O.
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	ffice address on our reco	ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ad	dress
		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 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 amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
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Particular	
ffective date, if other than the date of filing:  the effective date must be specific, cannot be prior to date of receipt or filed date and can the date this document is filed by the Florida Department of State)	(optional) nnot be more than 90 days after
Dated M ARCH 24 , 2011.	
Signature of a member or authorized represen	·
Signature of a member or authorized represent	tative of a member
Louis Sweltman  Typed or printed name of sign	-n/
	<u> </u>

Page 3 of 3

Filing Fee: \$25.00