L12000720024

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COVER LETTER

_	ision of Cor				
SUBJECT:	Duval Real	lty Trust, L.L.C			
SOBJECT.					
The enclosed	Articles of	Amendment and fee(s) are sul	bmitted for filing.		
Please return	all correspo	endence concerning this matter	to the following:		
		Duane Romanello			
			Name of Person		
			Firm/Company		
	1919 Blanding Blvd				
			Address		
		Jacksonville, FL 32210			
		Ken Atlee <ken@atleegrou< td=""><td>City/State and Zip Code</td><td></td></ken@atleegrou<>	City/State and Zip Code		
		E-mail address: (to be used for future annual report noti	fication)	
For further in	formation co	oncerning this matter, please c	all:		
Duane Roma	nello	_	904 384-1441 at ()		
	Name of	Person	Area Code Daytim	e Telephone Number	
Enclosed is a	check for th	e following amount:			
≌ \$ 25.00 Fil	ling F ec	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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

Duval Realty Trust, LLC (Name of the Lim	Ited Liability Company as it nov (A Florida Limited Liability Co.	w appears on our records,)		
The Articles of Organization for this Limited Florida document number L12000120024	and assigned			
This amendment is submitted to amend the fol	llowing:			
A. If amending name, enter the new name	of the limited liability comp	oany here:		
The new name must be distinguishable and contain the	words "Limited Liability Compan	y." the designation "L.L.C" or the abb	reviation "LL.C.	S S
Enter new principal offices address, if appli	cable:		<u> </u>	Sign
(Principal office address MUST BE A STRE	ET ADDRESS)		တ —— ယ.	
				97. 97.
Cadamana and Maranda and American Maranda and Ameri			PM 12:	- 전 - 연 - 전 - 전 - 전 - 전 - 전 - 전 - 전 - 전 - 전 - 전
Enter new mailing address, if applicable:			<u> </u>	
(Mailing address MAY BE A POST OFFICE	<u></u>		<u> </u>	
B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:		ress on our records, <u>enter t</u>	he name of t	the new
New Project of Office Addition	5851 Timuquana Road #30	01		
New Registered Office Address:		nter Floridu street address		
	Jacksonville	, Florida 322	10	
	Cin	, , , , , , , , , , , , , , , , , , , ,	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

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>	Name	Address	Type of Action
MGR Timothy J. Benner	Timothy J. Benner	15 Ponte Vedra Circle	🗆 Aðd
	Ponte Vedra Beach, Ft. 32082	■ Remove	
			Change
			□ Remove
			Change
		C Add	
		Remove	
			☐ Change
			
		Remove	
			☐ Change
			□ Add
		□ Remove	
		Change	
		D Add	
		□ Петоче	
			□ Change

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Filing Fee: \$25.00