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SECRETARY OF STATE

T. Buron OCT 2.8. 2014

MARSH, MORIARTY, ONTELL & GOLDER, P.C.

ATTORNEYS AT LAW
18 TREMONT STREET, SUITE 900
BOSTON, MASSACHUSETTS 02108
(617) 778-5100
TELECOPIER (617) 720-2565

October 23, 2014

MICHAEL H. MARSH ROBERT J. MORIARTY, JR. JEFFREY L. ONTELL RICHARD M. GOLDER EDWARD A. ACTON
JOSEPH D. CONWAY †
LAURA L. FITZGERALD
LAURA J. NEWCOMB
MICHAEL D. BUONICONTI

KATHERINE E. McGARR

OF COUNSEL
JOSEPH T. RUBINSTEIN
† ALSO ADMITTED IN NEW HAMPSHIRE

7, JR. TE

Via Federal Express

Florida Department of State Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

Re:

JWC Taggart Cay LLC

Amendment to Articles of Organization

Dear Sir or Madam:

In connection to the above, enclosed please find the completed application for the Articles of Amendment to Articles of Organization, together with our check in the amount of \$60.00 representing payment of the filing fee.

If you have any questions or need anything further, please do not hesitate to contact me.

RJM/ldg Enclosures

COVER LETTER

	egistration Sec vision of Corp						
CUDIFOR	JWC TAG	GART CAY LLC					
SUBJECT	·	Name of Limited Liability Company					
The enclose	ed Articles of A	mendment and fee(s) are sub-	mitted for filing.				
Please retu	n all correspon	dence concerning this matter	to the following:				
		ROBERT J. MORIAI	RTY, JR.				
			Name of Person				
		MARSH MORIARTY ONTELL & GOLDER P.C.					
			Firm/Company				
•		18 TREMONT STREET, SUITE 900					
		Address					
		BOSTON, MA 0210	8				
			City/State and Zip Code				
		RMORIARTY@MMC					
		E-mail address: (1	to be used for future annual report notific	ation)			
For further	information co	ncerning this matter, please ca	all:				
Robert	l. Moriarty, .	Jr.	at () 778-5100 Area Code Daytime				
	Name of	Person	Area Code Daytime	Felephone Number			
Enclosed is	a check for the	e 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:

TO:

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

JWC TAGGART CAY LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our recor Liability Company)	<u>(ds.</u>)
The Articles of Organization for this Limited Liability Companification of Companies of Organization for this Limited Liability Companies of Compani	y were filed on October 22,	2012 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
N/A		
The new name must be distinguishable and end with the words "Limited Lia	ability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he	N/A office address on our record	ts, enter the name of the new
Name of New Registered Agent: New Registered Office Address:		
	Enter Florida street addre	ess
	, F	lorida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Preston Giuliano Capital	334 Broadway	Add
	Parmers LC	Providence, RI 02909	■ Remove
MGR —	Preston Giuliano Capital	334 Broadway	Add
	Partners LLC	Providence, RI 02909	□ Remove
			
			Add Add
			Remove 7
			FLOOD Aid DA
			□ Add
		***************************************	□ Remove
			Add
			Remove

D. If ar	•	ter change(s) here: (Attach additional sheets, if necessary.)		
1	The Company has adopted the Florida Revised Limited Liability Company Act and has named its former Managing Member to be the Manager.			
		<u> </u>		
Effe (The e	ective date, if other than the date of effective date must be specific, cannot be prior date this document is filed by the Florida Department.	to date of receipt or filed date and cannot be more than 90 days after		
Date	October 23	2014		
Daic	ou	Cerl		
-	Signature	of a member or authorized representative of a member		
	Robert J. Moriarty, Jr.			
		Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIO,