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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338 Phone

Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please..

Email Address:___

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FAX COVER SHEET

TO		
COMPANY		
FAXNUMBER	18506176383	
FROM	Kimberly Laughrey	
DATE	2018-03-22 14:24:55 CST	
RE	Huntington Ave. LLC	
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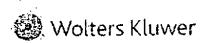
COVER MESSAGE

Thank You,

Nicole Diffenbaugh Fulfillment Specialist CT Corporation

Team (614) 280-3338

GlobalFulfillmentTeam@wolterskluwer.com



1209 N Orange Street Wilmington, DE 19801

www.wolterskluwer.com

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

	ON AVE. LLC			
(Name of the Limited Limited Limited (A Florida Limited	nny as H now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number L12000157498	y were filed on 12/17/2012	and assign	ed	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	bility company here:			
The new name must be distinguishable and contain the words "Limited Liab	bility Company," the designation "LLC" or the	abbreviation "L.L.C	. 1	•
Enter new principal offices address, if applicable:				•
(Principal office address MUST BE A STREET ADDRESS)				•
(Mailing address MAY BE A POST OFFICE BOX)), (C)		2 4 4 8 B	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	office address on our records, ente ere:	er the name of	<u>88.</u>	new
Name of New Registered Agent:		27 27 27 10	6 1 :6	-
New Registered Office Address:		<u> </u>		_
13011 130500000 0 0000000000000000000000	Enter Florida street oddress			
	, Florida	<u>.</u>		_
	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 heing 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

Title	Name	Address	Type of Action
MGR	Kevin Rattigan	214 Robin Drive	D Add
		Sarasota, FL 34236	■ Remove
			☐ Chunge
MGR	Jane Rattigan	214 Robin Drive	
		Sarasota, FL 34236	□ Remove
			Change
			Add
			Remove-
			Changeo
•			O Add
			☐ Remove
	·		□ Велюус
			Change
			□ Add
			☐ Remove
			Change

To:

Page 3 of 3

Jane Rattigan, Member Typed or printed name of signee

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