

L130000020567

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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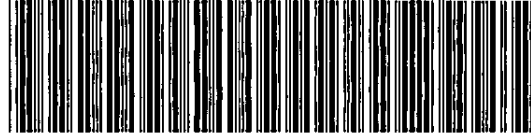
(Business Entity Name)

(Document Number)

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16 JAN 27 PM 12:25
TALLAHASSEE, FLORIDA

FEB 01 2016

Y SULKER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Confederate Point Acquisition, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Justin G. Cerrato

Name of Person

Hathaway & Reynolds, P.A.

Firm/Company

50 AIA North, Suite 108

Address

Ponte Vedra Beach, FL 32082

City/State and Zip Code

justin.cerrato@pvtitle.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Justin G. Cerrato

at (904) 373-3174

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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:
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**

Confederate Point Acquisition, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02-08-2013 and assigned
Florida document number L13000020567.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, Florida, 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

Title	Name	Address	Type of Action
AMBR	Jeff Klotz	645 Mayport Road, Suite 5	☐ Add
		Atlantic Beach, FL 32233	☐ Remove
			☐ Change
AMBR	KABR Real Estate Investment Partners III, LLC	85 Challenger Road, Suite 501	☐ Add
		Ridgefield Park, NJ 07660	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
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			☐ Change

16 JAN 27 PM 12:25
CLERK OF SUPERIOR COURT
FLORIDA

FILED

11/11/1954

16 JAN 27 PM 1:25
Pursuant to 28 USC 502(b)(3)(b)
will not be used as the

Dated: January 26, 2016.

Typed or printed name of signer