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COVER LETTER

TOE

Registration Section Division of Corporations

SUBJECT:

CPLACE FRANKLIN SNF, 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:

Aaron Bloom

Name of Person

Firm/Company

310 10th Ave. North

Address

Safety Harbor, FL 34695

City/State and Zip Code

aaron.bloom.gc@gmail.com

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

For further information concerning this matter, please call:

Aaron Bloom

727, 420-2329

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

CPLACE FRANKLIN SNF, 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	y Company were filed on April 25, 2013	and assigned	
Florida document number L13000060583	<u></u> .	a Aug	
This amendment is submitted to amend the following:	:	23	
A. If amending name, enter the new name of the li	imited liability company here:		
The new name must be distinguishable and end with the v "L.L.C."	words "Limited Liability Company," the designation	on "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADd	DRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac		er the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Florida	a Zip Code	
	City	ng 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 608, 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 the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	MID FLORIDA SENIOR CHOICE, LLC	310 10th Ave N	Add
		Safety Harbor, FL 34695	Remove
MGRM	West Coast Commonwealth Partners, LLC	310 10th Ave N	_ _
		Safety Harbor, FL 34695	Remove
MGR	TN FUND 100, LLC	310 10th Ave N	_ _
		Safety Harbor, FL 34695	Remove
MGR	ROKR, LLC	310 10th Ave N	Add
		Safety Harbor, FL 34695	Remove
MGR	EUGENE RENSCH	310 10th Ave N	Add
		Safety Harbor, FL 34695	Remove
MGR	LYNDA HEBBELN	310 10th Ave N	#U6 23
		Safety Harbor, FL 34695	Remove

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGR	GPD TEN PROPERTIES, LLC	310 10th Ave N	Add
		Safety Harbor, FL 34695	Remove
MGR	EIG FRANKLIN, LLC	310 10th Ave N	− ✓ Add
		Safety Harbor, FL 34695	
MGR	TBK PARTNERS, LLC	310 10th Ave N	− ✓ Add
		Safety Harbor, FL 34695	
			Add
			Add .
			Remove
		· '; · · · · · · · · · · · · · · · · · · ·	Remove Add
		<u> </u>	Remove

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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