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Florida Department of State

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T. HAMPTON

COVER LETTER

(((H15000017532 3)))

	gistration Sec Vision of Carp			•		
eun ieat.	FLORIDA POTENTIAL PROPERTIES, LLC Name of Limited Liability Company					
SUBJECT:						
The encloses	d Articles of A	mendment and fee(s) are sub-	mitted for filing,			
Please return	n all correspon	dence concerning this matter	to the following:			
		ASHLEY H. FRALEI	GH			
			Name of Person			
FLORIDA POTENTIAL PROPERTIES, LLC						
Firm/Company						
		POST OFFICE BOX	(592			
	Address					
	MADISON, FLORIDA 32341					
City/State and Zip Code						
		E-mail address: (to be used for future annual report notifi	cation)		
For funther i	nformation co	ncerning this matter, please ca	all;			
ASHLEY H. FRALEIGH			850 , Qつろ	- 6176		
	Name of	Person		Telephone Number		
Enclosed is:	a check for the	following amount:	·			
■ \$25.00 F	Filing Fec	☐ \$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 Taliahassee, FL 32314 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building

Clifton Building 2661 Executive Center Circle Tailahassee, FL 32301

ARTICLES OF AMENDMENT TO . ARTICLES OF ORGANIZATION OF

RGANIZATION (((H15000017532 3)))

FLORIDA POTENTIAL PR	OPERTIES, L	LC	75 TASS
(Name of the Limit	ed Linbility Comps (A Florida Limited	inv as it naw appears on our records.) Liability Company)	TO LA TA
The Articles of Organization for this Limited L Florida document number L13000064420 This amendment is submitted to amend the foll A. If amending name, enter the new name of	owing:		2 PH 12: 33 ASSEE, FLORIDA
The new name must be distinguishable and end with the	words "Limited List	bility Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		140 SE FRANCIS STREE	ET
(Principal office address MUST BE A STREET ADDRESS)		MADISON, FLORIDA 323	140
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	POST OFFICE BOX 592 MADISON, FLORIDA 323	341
B. If amending the registered agent and registered agent and/or the new registered of	or registered of fice address her	Mice address on our records, <u>e</u> e:	nter the name of the new
Name of New Registered Agent:	ASHLEY H. FRALEIGH		
New Registered Office Address;	140 SE FR	ANCES STREET Enter Florida street address	
	MADISON		32340
		City , Floric	da 32340 Zip Code
New Registered Agent's Signature, if changing I	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

Page 1 of 3

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		(((H15000017532 3)))		
Title _	Name	Address	Type of Action	
MGR	BRIAN A. ANNETT	2181 SE OLUSTEE DRIVE	Add	
		LEE, FLORIDA 32059	■ Remove	
AMBR	BRIAN A. ANNETT	2181 SE OLUSTEE DRIVE		
		LEE, FLORIDA 32059	Remove	
AMBR	MARY CHRISTINE ANNE	2181 SE OLUSTEE DRIVE	Add	
		LEE, FLORIDA 32059	■ Remove	
MGR	AHSLEY H. FRALEIGH	POST OFFICE BOX 592		
		MADISON, FLORIDA 32341	Remove	
AMBR	ASHLEY H. FRALEIGH	POST OFFICE BOX 592	Add	
		MADISON, FLORIDA 32341	Remove	
			AE 5	
			HASSE FEE	
	•		PHI2: 32	

). If amen	ding any other information, enter change(s) here	(((H15000017532 3))) : (Attach additional sheets, if necessary.)
,		
_		
(The effect	re date, if other than the date of filing: tive date must be specific, cannot be prior to date of receipt or fil this document is filed by the Florida Department of State)	(optional) ed date and cannot be more than 90 days after
Dated _	January 16 2015	_ ·
	ashly HFralen	
	Signature of a member or autho	rized representative of a member
	AHSLEY H. FRALEIGH	

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