L13000009793

(Requ	estor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/s	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ness Entity Nan	ne)
(Docu	iment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



900251437609

13 SEP 23 FH 1:5

RECEIVED STATE

FILED
2013 SEP 23 AH ID: L4

SEP 2 4 2013 T. HAMPTON



ACCOUNT NO. : 1200	00000195
REFERENCE : 8169	7938658
AUTHORIZATION :	revelle Al.
COST LIMIT : \$ 25	mels de man
ORDER DATE : September 20, 2013	
ORDER TIME : 12:15 PM	
ORDER NO. : 816931-005	
CUSTOMER NO: 7938658	
DOMESTIC AMENDMENT	FILING
NAME: STRATA OPERATIONS, LLC	
EFFECTIVE DATE:	
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION	1
PLEASE RETURN THE FOLLOWING AS PROOF OF	FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY	
CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Susie Knight EXT# 52	2956

EXAMINER'S INITIALS:

COVER LETTER

Division of Corp	orations					
Strata Op	perations, LLC					
	Name of Limit	ed Liability Company				
The enclosed Articles of A	mendment and fee(s) are subt	mitted for filing.				
Please return all correspondence concerning this matter to the following:						
	Brian Fitch					
		Name of Person	<u> </u>			
	Strata Operations, LLC	c				
	Firm/Company					
1200 Cypress Creek Road						
	Fort Lauderdale, FL 3	33309				
	City/State and Zip Code					
	ell@sebringadvisors.c	om				
	E-mail address: (to	be used for future annual report notificati	on)			
For further information con	cerning this matter, please ca	ıll:				
Eli Robles		954 670-1500				
Name of F	erson	at () Area Code & Daytime Te	elephone 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

TO:

Registration Section

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

Strata Operations, 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 ____5/13/13 Florida document number __L13000069793 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 end with 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

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, 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> <u>Name</u> Address Type of Action **MGRM** Joel Gonzales 1200 Cypress Creek Raod Fort Lauderdale, FL 33309 Remove MGRM Alfred Thomas 1200 Cypress Creek Road Fort Lauderdale, FL 33309 Remove MGRM Brlan M . Fitch 1200 Cypress Creek Road Fort Lauderdale, FL 33309 Remove Remove Remove

). If a	mending any other i	nformation, enter change(s) here: (Attach additional sheets, if necessar)	·.)

ated_	September 13		
		I Qualith & shlee	
		Signature of a member or authorized representative of a member	
		Elizabeth Robles, Representative of Member	
		Typed or printed name of signee	
		Page 3 of 3	

Filing Fee: \$25.00

2013 SEP 23 AH 10: 44