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## COVER LETTER

DOHERTY SUBJECT:	Y FLORIDA OKEECHOBEE, I	LLC		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filling.		
Please return all correspo	ondence concerning this matter	to the following:		
	ZENA SERRANO			
	Name of Person			
	ES INC			
	Firm/Company			
		Address		
	ALLENDALE, NJ 07401	ALLENDALE, NJ 07401		
	zserrano@dohertyinc.com	City/State and Zip Code		
	E-mail address: (	to be used for future annual report notification)		
For further information of	concerning this matter, please ca	all:		
Zena Serrano		201 818-4669 ext 1105		
Name o	of Person	at ( ) Area Code Daytime Telephone Number 20		
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee & □ \$60,00 Filing Fee    Certified Copy (additional copy is enclosed) □ \$60,00 Filing Fee    Certified Copy (additional copy is enclosed)		
	JNG ADDRESS:	STREET/COURIER ADDRESS: Registration Section		

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## DOHERTY FLORIDA OKEECHOBEE, 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 MAY 16, 2013 and assigned Florida document number  $\frac{L13000071899}{}$ 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 "L.L.C." 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 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 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

<u>Title</u>	<u>N</u> ame	Address	Type of Action
MBR	Doherty Apple Florida Extra, LLC	660 US Hwy One	
		Third Fl.	<b></b>
		No. Palm Beach, Fl 33408	Change
			Add
			□ Remove
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Note: If the date insert	er than the date of fili i, the date must be specific a ted in this block does not ate on the Department of	t meet the applicable	ate of filing or more than 9 statutory filing require	(optional) ) days after filing.) Pursua ments, this date will no	int to 605.0207 it be listed as
	a delayed effective er the record is filed	date, but not aid.	n effective time, at	12:01 a.m. on the	e earlier of
e record specifies The 90th day afte				ين موسية . موسية	
The 90th day afte	lune I	2017			
The 90th day afte	lune I	_ · 2017	6		JUN
The 90th day afte	lune I	_· 2017	5		JUN 20
ne record specifies The 90th day afte Dated	June 1		d representative of a mem	ber	JUN 20 PH

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Filing Fee: \$25.00