

(Red	questor's Name)	
(Add	dress)	
(A.J.)	d)	
(Mut	dress)	
(City	y/State/Zip/Phone	<del>;</del> #)
PICK-UP	WAIT	MAIL
/Ru	siness Entity Nan	no)
(Du:	Sifiess Cituty Han	ne)
(Do	cument Number)	·
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



500259122915

POLICY OF PROPERTY MAKEN THE 14 MAY -5 PH 2: 17

B. BOSTICK

MAY - 6 2014

PROHIVED

EXAMINER



ACCOUNT NO. : 12000000195 REFERENCE : AUTHORIZATION COST LIMIT : ORDER DATE: May 5, 2014 ORDER TIME: 11:33 AM ORDER NO. : 118167-005 CUSTOMER NO: 7379255 DOMESTIC AMENDMENT FILING NAME: OK RHODINE ROAD LLC EFFECTIVE DATE: XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Emily Gray -- EXT# 62925

EXAMINER'S INITIALS:

## COVER LETTER

TO: Registration Section **Division of Corporations** OK RHODINE ROAD 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:

Jessica Paz Mahoney, Esq.

Name of Person

Feldman & Mahoney, P.A.

Firm/Company

19321-C U.S. Hwy. 19 N., Suite 600

Clearwater, Florida 33764

City/State and Zip Code

bjohnson@kolter.com

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

For further information concerning this matter, please call:

Jessica Paz Mahoney, Esq. <sub>at.</sub> 727, 536-8003

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

OK RHODINE ROAD LLC		o- ou	
(Name of the Limited Liability Comps (A Florida Limited	Liability Company)	on our recorus.	
The Articles of Organization for this Limited Liability Company Florida document number <u>L13000095454</u> .	were filed on 07	/03/2013	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here	2:	
The new name must be distinguishable and end with the words "Limited Liab	oility Company," the de	signation "LLC" or the abbi	eviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
			2
·			:
Enter new mailing address, if applicable:		•	
(Mailing address MAY BE A POST OFFICE BOX)			
			` >
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		our records, <u>enter th</u>	e name of the n
Name of New Registered Agent:			<del> </del>
New Registered Office Address:	Enter Floride	a street address	
	City	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	•		zip cour
l hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete	performance of my	y duties, and I am fam	iliar with and
accept the obligations of my position as registered agent as p			

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	The Kolter Group LLC	701 South Olive Avenue, Suite 104	□ Add
		West Palm Beach, FL 33401	■ Remove
MGR	OK JV2 LLC, a Delaware LLC	701 South Olive Avenue, Suite 104	■ Add
		West Palm Beach, FL 33401	□ Remove
			<del></del>
<del></del>			🗆 Add
			_ □ Remove
			_ _□ Add
			_ Remove
			 Add
			_□ Remove
			_
			_□ Remove

O.	lf ame	amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
	_			
	_	· · · · · · · · · · · · · · · · · · ·		
	-			
•	The effe	ective date must be specific	n the date of filing: c. cannot be prior to date of receipt or filed date at the Florida Department of State)	(optional) nd cannot be more than 90 days after
		May 5	2014	
			Signatury of a member or authorized repr	
				1100

Page 3 of 3

Filing Fee: \$25.00