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| PICK-UP | ☐ WAIT | MAIL MAIL | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies | _ Çertificate: | s of Status | |
| Special Instructions to Filing Officer: | | | |
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SECRETARY OF STATE
ALLIAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations

102 Landing Way, 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:

Eli Feller

Name of Person

Efficient Property Management, LLC

Firm/Company

2 Industrial Way West Suite 300

Eatontown NJ 07724

City/State and Zip Code

yabeyman@reliancecorporate.com

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

For further information concerning this matter, please call:

Yaakov Beyman

at (732) 380-4655

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

| 102 Landing Way 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 7/10/2013 and assigned Florida document number L13000098131. |
| This amendment is submitted to amend the following: |
| A. If amending name, enter the new name of the limited liability company here: |
| 4160 Lexington Road, LLC |
| 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 |
| , Florida , Florida |
| City Zig 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 complywith I |

If Changing Registered Agent, Signature of New Registered Agent

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 discument is

being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liabilits

company has been notified in writing of this change.

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 | |
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| If amending any other information, | enter change(s) here: (Attach additional sheets, if necessary.) |
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| September 16 | 2013 |
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| | alle |
| Signature | e of a member or authorized representative of a member |
| Eli Feller | |
| | Typed or printed name of signee |

Page 3 of 3

Filing Fee: \$25.00