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| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------|
| (Ad | ldress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | isiness Entity Nan | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

| | gistration Sectivision of Corp | | | |
|--------------|--------------------------------|--|--|--|
| SUBJECT: | | Associates LLC | | |
| SUBJECT: | | Name of Limi | ted Liability Company | |
| The enclose | d Articles of A | mendment and fee(s) are subr | nitted for filing. | |
| Please retur | n all correspon | dence concerning this matter t | to the following: | |
| | | Dawn M. Carlton | | |
| | | | Name of Limited Liability Company at and fee(s) are submitted for filing. Accerning this matter to the following: M. Carlton Name of Person Maui Associates LLC Firm/Company I. Ocean Shore Blvd Address Beach Florida 32136 City/State and Zip Code @middiv.com E-mail address: (to be used for future annual report notification) his matter, please call: Gordon at (386 | |
| | | Kihei Maui Associates LLC | 2 | |
| Firm/Company | | | | |
| | | 3153 N. Ocean Shore Blvd | | |
| Address | | | Address | |
| | | Flagler Beach Florida 3213 | 6 | |
| | | | City/State and Zip Code | |
| | | dcarlton@middiv.com | | |
| | | E-mail address: (t | o be used for future annual report notif | ication) |
| For further | information co | ncerning this matter, please ca | ıll: | |
| Dawn M. C | Carlton and/or J | ames N. Gordon | _ | |
| | Name of | Person | Area Code Daytime | Telephone Number |
| Enclosed is | a check for the | following amount: | | |
| \$25.00 | Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | Certified Copy | Certificate of Status & Certified Copy |

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

| Kihei Maui Associates LLC | | | | | | |
|---|--|---|----------------------|-----------------|--|--|
| (<u>Name of the Limi</u> | ted Liability Compar (A Florida Limited L | ny as it now appears on our rec liability Company) | <u>cords.</u>) | | | |
| The Articles of Organization for this Limited L Florida document number L13000111401 | <u></u> , | were filed on August 6, 201 | 3 | and assigned | | |
| This amendment is submitted to amend the following | lowing: | | | | | |
| A. If amending name, enter the new name of | of the limited liabi | lity company here: | | | | |
| The new name must be distinguishable and contain the | woods with install in hill | itu Commonu " the designation "I | I C'' on the althous | intion of L.C." | | |
| · | | 3153 N. Ocean Shore Blvd | | iation L.L.C. | | |
| Enter new principal offices address, if applicable: | | Flagler Beach, FL 32136 | | | | |
| (Principal office address MUST BE A STREE | ET ADDRESS) | Tiaglet Beach, TE 32130 | | | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | 3153 N. Ocean Shore Blvd Flagler Beach, FL 32136 | | , o | | |
| B. If amending the registered agent and registered agent and/or the new registered of | | | ords, enter the | | | |
| Name of New Registered Agent: | James N. Gordo | on | | 2 2 | | |
| New Registered Office Address: | 3153 N. Ocean | Shore Blvd. | 7.00 | r eo | | |
| | Enter Florida street address | | | | | |
| | Flagler Beach | , | Florida 32136 | | | |
| | | City | 7 | Zip 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 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

Mage 1 of 3

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>Name</u> | <u>Address</u> | Type of Action |
|--------------|------------------------------|---------------------------|----------------|
| MGR | Gordon Property Company XXXI | 3153 N. Ocean Shore Blvd. | Add |
| | | Flagler Beach, FL 32136 | Remove |
| | | | ■ Change |
| MGR | JTS Holding Company LLC | 3153 N. Ocean Shore Blvd. | Add |
| | | Flagler Beach, FL 32136 | ☐ Remove |
| | | | ■ Change |
| | | | □ Add |
| | | | □ Remove |
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| | | | Remove |
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| | | | ☐ Change |

| New address: 3153 N. Ocean Shore Blvd., Flagler Beach, FL 32136 | | |
|--|---------------------------|-----------------------|
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| ctive date, if other than the date of filing: (optional | D = E | သူ |
| effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing. If the date inserted in this block does not meet the applicable statutory filing requirements, this dat iment's effective date on the Department of State's records. | g.) Pursuan e will not | t to 605. be liste |
| ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m ne 90th day after the record is filed. | . on the | earlie |
| d 1/28/2016 | | |
| | | |
| Signature of a member or authorized representative of a member | | |
| Compared of a manufaction of a manufacti | | |

Page 3 of 3

Filing Fee: \$25.00