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(F	Requestor's Name)	
(A	Address)	
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(C	City/State/Zip/Phone #	(1)
PICK-UP	WAIT	MAIL
(E	Business Entity Name)
(0	Ocument Number)	
Certified Copies	Certificates o	f Status
Special Instructions to	o Filing Officer:	
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2015 OCT 15 A II: 15 SEURETARY OF STATE ALLAHASSEE, FLORINA

RECEIVED PH 4: 21
SECREMENT OF STATE

OCT 16 2015

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195		
REFERENCE : 833614 81	.528A	
AUTHORIZATION Spelle man)	
COST LIMIT : \$ 25.00		
ORDER DATE : October 15, 2015		
ORDER TIME : 3:55 PM		
ORDER NO. : 833614-005		
CUSTOMER NO: 81528A	MACE SEE	-17
DOMESTIC AMENDMENT FILING NAME: GOLDENBEAR SOUTH, LLC	TARY OF STATE ASSEE, FLORIDA	
EFFECTIVE DATE:		
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING		

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER'S INITIALS:

COVER LETTER

		ition Sect of Corpo					
SUBJEC		LDENBE	AR SOUTH, LLC, a Florida	limited liability company			
3013110	*,		Name of Lir	nited Liability Company			
The enclos	sed Arti	cles of Aı	nendment and fee(s) are sub	mitted for filing.			
Please ren	urn all c	orrespond	ence concerning this matter	to the following:			
			Lourdes S. Regan				
				Name of Person			
				Firm/Company			
			232 Oak Street				
				Address			
			Medford, NY 11763			Σω >	·
			lregan@rdisolutions.com	City/State and Zip Code		2015 OCT 15 SECRETAR) ALLAHASSE	۳,
		,	E-mail address: (to be used for future annual re	eport notification)	C22 #51	<u> </u>
For further	r inform	ation con	cerning this matter, please ca	all:		5 A	
Lourdes S	. Regan			631 766- at ()	-9299		O
	ł	Name of Pe	erson	Arca Code	Daytime Telephone N	Number	
Enclosed is	s a chec	k for the f	following amount:				
S \$25.00) Filing I	Fce	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Consect) Co	0.00 Filing Fee, ertificate of Status & ertified Copy Iditional copy is enclosed	

MAILING ADDRESS:

TO:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassec, 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

ompany as it now appears on our record transitive Company)	<u>ls.</u>)
pany were filed on 10/17/2013	and assigned
	-
liability company here:	
Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
<u>s)</u>	
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d office address on our records <u>here</u> :	, enter the name of the
Enter Florida street address	S.
, Flo	orida Ziv Code
	d office address on our records here: Enter Floridu street address, Floridu s

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

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>	Address	Type of Action
MGRM	Daniel A. Regan	232 Oak Street	□ Add
		Medford, NY 11763	■ Remove
		MANAGEMENT	Change
			□ Add
			☐ Remove
			Change
			□ Add
			Remove
			ANALESSAH LOOK I DOOR
			Remove
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fective date, if other than the date of filing: in effective date is listed, the date must be specific and cr	amot be prio	r to date of f	ling or more	than 90 days	ptional) after filing.)	Pursun	at to 605.02
ote: If the date inserted in this block does not medicument's effective date on the Department of State	et the application	cable statut	ory filing re	quirements.	, this date w	rill not	be listed
·							
e record specifies a delayed effective dat The 90th day after the record is filed.	te, but no	ot an effe	ctive tim	e, at 12:0)1 a.m. o	n the	earlier
nted October 14	2015						
HCCI		 					
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Page 3 of 3

Filing Fee: \$25.00