## 113000152044

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March 26, 2014
VIA HAND DELIVERY

Secretary of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

CATHERINE B. CHAPMAN° JENNIFER SULLIVAN DAVIS ROBERT D. FINGAR THOMAS J. GUILDAY GEORGE W. HATCH, III\* DANIEL J. KUHN FRANCES C. LOWE® TRUDY E. INNES RICHARDSON CARRIE MENDRICK ROANE JAKEN E. ROANE CHRISTINA L. SCARINGE MARY K. SIMPSON\*\* MICHAEL D. WEST ALBERT J. WOLLERMANN° OF COUNSEL **GEOFFREY B. SCHWARTZ** J. KENDRICK TUCKER

- \* BOARD CERTIFIED CONSTRUCTION LAWYER
- \*\* BOARD CERTIFIED CIVIL TRIAL LAWYER
- ALSO ADMITTED IN GA

A MEMBER OF

THE HARMONIE GROUP

G2 Sand Lake, LLC - Document Number L13000152044

Dear Sir or Madam:

Re:

I have enclosed the original and one copy of Articles of Amendment to Articles of Organization for the above-described limited liability company and a check for \$55.00 for the amendment fee and certified copy of the Articles with this amendment. Please give me a call at 224-7091 when this has been processed and I will have a runner pick it up from our box.

Thank you very much for your help.

Sincerely,

Chris

Chris Gibson, Assistant to Geoffrey B. Schwartz and Daniel J. Kuhn

/cg Enclosures

## **COVER LETTER**

TO: Registration Section
Division of Corporations

G2 SAND LAKE, 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:

## Chris Gibson

Name of Person

Guilday, Schwartz, Simpson, West, Hatch & Lowe, P.A.

Firm/Company

1983 Centre Pointe Boulevard, Suite 200

Address

Tallahassee, Florida 32308

City/State and Zip Code

sgornto@harbourpetro.com

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

For further information concerning this matter, please call:

Chris Gibson

**,,,,850**,224-7091

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

☐ \$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**

TALLAHASSE AM 10:38

G2 SAND LAKE, 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 Compan	y were filed on 10/29/2013 and assigned
Florida document number L13000152044	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
FRUITLAND, LLC	
The new name must be distinguishable and end with the words "Limited Lie	ability 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)	
	<del></del>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
D. If any and the second second second	65 11
b. It amending the registered agent and/or registered of registered agent and/or the new registered office address he	office address on our records, enter the name of the new re:
Name of New Registered Agent:	
Navy Basistanad Office Address	
New Registered Office Address:	Enter Florida street address
	. Florida
<del></del>	City 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

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
MGRM	G2 MASTER PARTNERSHIP, LLC	21 WEST FEE AVENUE, SUITE F	Add
		MELBOURNE, FLORIDA 32901	Remove
AMBR	G2 ORLANDO, LLC	21 WEST FEE AVENUE, SUITE F	<b>A</b> dd
		MELBOURNE, FLORIDA 32901	Remove
AMBR	KENNETH L. WOOD	2070 SOUTH ORANGE BLOSSOM TRAIL	 ■ Add
		APOPKA, FLORIDA 32703	□ Remove
			_ _
			_□ Remove
			_ _□ Add
			_□ Remove
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			_□ Remove

	of filing:(optional rior to date of receipt or filed date and cannot be more than 90 days after epartment of State)
the date this document is filed by the Florida D	
the date this document is filed by the Florida Doated  March	epartment of State)

Page 3 of 3

Filing Fee: \$25.00