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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : VCORP SERVICES, LLC

Account Number : 120080000067

: (845)425-0077

Fax Number

: (845)818-3588

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AM GRAND COURT LAKES LLC

Certificate of Status Certified Copy Page Count 03 Estimated Charge \$25.00

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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	DURT LAKES LLC	
(Name of the Limited Liability Compa (A Plorida Limited	nny as it now appears on our reco Liubility Company)	<u>rds.)</u>
	4470470040	
The Articles of Organization for this Limited Liability Company	were filed on 11/01/2013	and assigned
Florida document number E13000153852		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LL	.C" or the abbreviation "L.L.C."
	280 Sierra Drive	
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	Miami, Plorida 33179	
Enter new mailing address, if applicable:	280 Sierra Drive	7AC 2015
Mailing address MAY BE A POST OFFICE BOX)	Miami, Florida 33179	
mining wants mail be a lost (a lice may		
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3. If amending the registered agent and/or registered o	ffice address on our record	
registered agent and/or the new registered office address her	e:	
	_	<b>19 19 19</b>
Name of New Registered Agent:		\$## <b>#</b>
Traine of their registered Wear.		
New Registered Office Address:		
	Enter Florula street addr	
	, F	itorida
	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

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = A	nthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□ Remove
			☐ Change
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Effective date, if other than the date of filing:  If an effective date is listed, the date must be specific and cannot be prior to  Note: If the date inserted in this block does not meet the applicat document's effective date on the Department of State's records.	(optional) of date of filing or more than 90 days after filing.) Pursuant ole statutory filing requirements, this date will not be	to 605.020 oc listed a
he record specifies a delayed effective date, but not The 90th day after the record is filed.	an effective time, at 12:01 a.m. on the o	earlier o
Dated November 16 2015	_,	
Λ ./		
Signature of a member or author.	ized representative of a member	<del></del>

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