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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: VCORP SERVICES, LLC Account Name

Account Number: I20080000067 Phone

: (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.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **EUSTIS PLAZA 2 LLC**

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SEP 2 6 2016

S. YOUNG

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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TUSTIS Plaza 2 (Name of the Limited Liability Company) (A Florida Limited Liab		ecorde.)
•		
The Articles of Organization for this Limited Liability Company we	re filed on <u>Decem</u>	ber 9, 2013 and assigned
Florida document number L130001701610		'
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	y company here:	
The new name must be distinguishable and contain 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)		5
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		2
Enter new mailing address, if applicable:		ය පූ පැද
(Mailing address MAY BE A POST OFFICE BOX)		99 3
-		<u> </u>
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:	e address on our rec	ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street o	ddrae
	Chief & try stat given in	
	Clty	, Florida
New Routstered Agent's Signature, if changing Registered Agent:	·	
I hereby accept the appointment as registered agent and agree t	to act in this canacity.	I further agree to comply with the
provisions of all statutes relative to the proper and complete per accept the obligations of my position as registered agent as pro- being filed to merely reflect a change in the registered office ad-	rformance of my dulle. vided for in Chapter 6	s, and I am familiar with and 105, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

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company has been notified in writing of this change.

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

MGR = M AMBR = A	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	RIVK Mark	Clo SMI-250 N.R Suite 571, Beverly	beition Blud. and Hills, CA90211 Bremove
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Note: I docume	re date, if other than the date of filing: (optional) (the date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 6 filther date inserted in this block does not meet the applicable statutory filing requirements, this date will not be lint's effective date on the Department of State's records.	isted as the
he reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear 30th day after the record is filed.	iler of:
Dated _	Sept. 22, 2016.	
	Signature of a member or authorized representative of a member	
	Cam Mark.	
	Typed or printed name of signee	

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