L140000 29329

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	. #)
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(Do	cument Number)	
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MAR 1 4 2013 T. HAMPTON

COVER LETTER

TO:

Registration Section
Division of Corporations

TRG PROPERTY DEVELOPMENT 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:

GABRIELLE MORLOCK Name of Person TRG PROPERTY DEVELOPMENT LLC Firm/Company 3072 SHIPPING AVE Address MIAMI FL 33133 City/State and Zip Code GABIM79@EARTHLINK.NET

GABRIELLE	MORLOCK	_{at} 94
		3118

₃₁,941,5866234

Name of Person

For further information concerning this matter, please call:

Area Code

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

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

TRG PROPERTY DEVELOPMENT LLC

(Name of the Limited Liability Company as it now appears on our records.)

(****	ortal Elimed Elitotity Company,	
The Articles of Organization for this Limited Liabili Florida document number <u>L1400029329</u>	ty Company were filed on 2/20/2014	and assigned
This amendment is submitted to amend the following	g:	ZOIN HAR SECRET
A. If amending name, enter the new name of the	limited liability company here:	HAR IS
The new name must be distinguishable and end with the words		
Enter new principal offices address, if applicable		
(Principal office address MUST BE A STREET AL	DDRESS)	25 0 2 2
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX		
B. If amending the registered agent and/or r registered agent and/or the new registered office Name of New Registered Agent:	registered office address on our records, <u>entaddress here:</u>	ter the name of the new
New Registered Office Address:		
	Enter Florida street address	
	, Florida	I
_	City	Zip Code
New Registered Agent's Signature, if changing Regis	tered 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, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	GABRIELLE MORLOCK	3072 SHIPPING AVE MIAMI FL 33	133 Add
			☐ Remove
			Add
			☐ Remove
			2014 ALLAH
			TALLAHASSEE, FLGRIDA
#			77 C O O O O O O O O O O O O O O O O O O
			□ Remove
	·		🗖 Add
			□ Remove
		···	Remove

D. If amending any other information, enter change(s) here: (Attach additional	al sheets, if necessary.)
	<u></u>
E. Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be runed the date this document is filed by the Florida Department of State)	(optional) nore than 90 days after
Dated March 2014.	
Sall Merkl	
Signature of a member or authorized representative of	a member
Typèd or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00

2014 MAR 12 PM 12: 07
SECRETARY OF SEMEN