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| Special Instructions to Filing Officer: |
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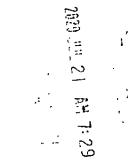
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COVER LETTER

| | gistration Section ision of Corporations |
|----------------|---|
| SUBJECT: | LINCOLNVILLE PROPERTIES LLC |
| SUBJECT: | Name of Limited Liability Company |
| The encloses | d Articles of Amendment and fee(s) are submitted for filing. |
| Please return | all correspondence concerning this matter to the following: |
| | Stephen F. Difato |
| | Name of Person |
| | The Law Offices of Stephen F. Difato PLLC |
| | Firm/Company |
| | 164 Pinehurst Pointe Drive |
| | Address |
| | City/State and Zip Code St. Augustine, FL 32092 |
| | E-mail address: (to be used for future annual report notification) |
| For further is | nformation concerning this matter, please call: |
| Han | Name of Person at (904) 537 6169 Area Code Daytime Telephone Number |
| Enclosed is a | check for the following amount: |
| ■ \$25.00 E | Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) S60.00 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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

| TINCOU | NVIII | \mathbf{F} PROPE | RTIESTIC |
|--------|-------|--------------------|----------|

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

| (A Florida Lim | ited Liability Company) | | | | |
|---|-------------------------------|---|--|--|--|
| The Articles of Organization for this Limited Liability Completion of Complete L14000068999 L14000068999 | pany were filed on04/29 | 9/2014 and assigned | | | |
| This amendment is submitted to amend the following: | | | | | |
| A. If amending name, enter the new name of the limited | liability company here: | | | | |
| Osprey Holdings NEFL LLC | | | | | |
| he new name must be distinguishable and contain the words "Limited l | Liability Company," the desig | nation "LLC" or the abbreviation "L.L.C." | | | |
| Enter new principal offices address, if applicable: | 134 13TH ST | 134 13TH ST | | | |
| Principal office address MUST BE A STREET ADDRESS | SAINT AUGUSTII | SAINT AUGUSTINE, FL 32080 | | | |
| Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) | 34 13TH ST SAINT AUGUSTR | NE, FL 32080 | | | |
| B. If amending the registered agent and/or registered offigent and/or the new registered office address here: Name of New Registered Agent: Stephen D | | rds, enter the name of the new registo | | | |
| New Registered Office Address: 164 Pinch | 164 Pinchurst Pointe Drive | | | | |
| New Registered Office Address. | Enter Florida : | street address | | | |
| St. Augusi | nte | , Florida <u>32092</u> | | | |
| | | | | | |

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> | <u>Address</u> | Type of Action |
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| effecti <u>te:</u> If t | date, if other that we date is listed, the date inserted in a effective date on | ate must be specific this block does no | and cannot be pri it meet the app | licable statutory | g or more than 90 filling requiren | (optional) days after filing.) P nents, this date wi | ursuant to 605.0207 Il not be listed as |
| cord sp | pecifies a delayed e | ffective date, but r | not an effective | : time, at 12:01 | a.m. on the earl | ier of: (b) The S | 00th day after the |
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| ted | umd 10 | 11. | -7/1/1/2 | <u>/</u> . | | | |
| | | . MY/C | | | | | |
| | i . | Signature of | a member or au | thorized represen | tative of a memb | er | |
| | 1.0 | Dance | rical - | ` | | | |