

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations
Fax Number : (850)617-6363

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: tim@sbrealtyinc.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
NEW MINGLEWOOD HOLDINGS LLC

Certificate of Status	0
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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

NEW MINGLEWOOD HOLDINGS 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 Company were filed on 06/04/14 and assigned
Florida document number L14000090030

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with 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)

c/o SCHOONER BAY REALTY

1210 DEL PRADO BLVD S

CAPE CORAL, FL 33990

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

c/o SCHOONER BAY REALTY

1210 DEL PRADO BLVD S

CAPE CORAL, FL 33990

B. If amending the registered agent and/or registered office address on our records, enter the name of the new
registered agent and/or the new registered office address here:

Name of New Registered Agent:

TIM EDMISTON

New Registered Office Address:

1210 DEL PRADO BLVD S

Enter Florida street address

CAPE CORAL

Florida 33990

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 certify that the limited liability
company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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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

AMER = Authorized Member

<u>Entity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	THE JUST EXCHANGE CONNECTION INC	3435 10TH ST N, STE 301 NAPLES, FL 34103	☐ Add ☒ Remove

MGR RAMESH SINGH 74 E 79TH ST, APT 8 ☐ Add
NEW YORK, NY 10075 ☐ Remove

☐ Aufc

☐ Remove

□ Add

☐ Remove

☐ Add:

☐ Remove

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Add Remove

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)
 • The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State.

Dated Nov 2 2015

(Signature)

 Signature of a member or authorized representative of a member

RAMESH SINGH

Typed or printed name of signer

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