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SECRETARY OF SIAIS, TALLAHASSEE, FLORID,

## COVER LETTER

	egistration Se ivision of Cor				
SUBJECT	Bella Collin	Bella Collina Real Estate Company LLC			
SUBJECT	•	Name of Lin	nited Liability Con	праву	<del></del> -
The enclos	ed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please retu	rn all correspo	ondence concerning this matter	to the following	:	
		Paul Simonson			
			Name of P	erson	<del></del>
		Bella Collina Real Estate (	Company LLC		
		<u></u>	Firm/Com	pany	<del></del>
		550 SOUTH FLAGLER D	PRIVE, SUITE 9	00	
			Addres	s	
		WEST PALM BEACH, F	L 33401		
			City/State and	Zip Code	
		psimonson@scharholdings.	com		
		E-mail address: (	to be used for futu	re annual report not	ification)
For further	information c	oncerning this matter, please c	all:		
Mary Gerv			407 at (	469-4980	
	Name o	f Person	Area (	Code Daytin	ne Telephone Number
Enclosed is	s a check for th	ne following amount:			
\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	\$55.00 Fil Certified (additional		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	MAILI	ING ADDRESS:	:	STREET/COUR	IER ADDRESS:
Registration Section Division of Corporations P.O. Box 6327			1	Registration Section	on
				Divisi <mark>on of Corp</mark> o Clifto <b>n</b> Building	rations
		ssee, FL 32314	2	2661 Executive Co	enter Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bella Collina Real Estate Company LLC	l		
( <u>Name of the Limited Liabili</u> (A Florid	ity Company as t n a Limited Liability (	ow appears on our records.) Company)	
The Articles of Organization for this Limited Liability C Florida document number L14000106094	Company were fil	ed on 07/03/2014	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability con	npany here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Comp	any," the designation "LLC" or the abbro	eviation "L.L.C."
Enter new principal offices address, if applicable:			<del>1</del>
(Principal office address MUST BE A STREET ADDI	RESS)		SEC 18
			JAN AH
	-		Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z
	ļ		P 38
Enter new mailing address, if applicable:			<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			
	]		RATE PROFES
B. If amending the registered agent and/or registered agent and/or the new registered office add		dress on our records, <u>enter th</u>	e name of the new
Name of New Registered Agent:			
New Registered Office Address:			
		Enter Florida street address	
		, Florida	
	City	· —	Zip Code
New Registered Agent's Signature, if changing Registere	d Agent:		
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and confidence accept the obligations of my position as registered as being filed to merely reflect a change in the registere company has been notified in writing of this change.	omplete perforn gent as provided	nance of my duties, and I am fan Ifor in Chapter 605, F.S. Or, if	niliar with and this document is
	If Changing Reg	istered Agent, <u>Signature of New Regis</u>	tered Agent

or removed from our records: MGR = Manager AMBR = Authorized Member <u>Title</u> <u>Name</u> <u>Address</u> Type of Action Myles Newell 550 SOUTH FLAGLER DRIVE MGR ■ Add Suite 900 □ Remove PALM BEACH, FL 33401 \_□ Change Matthew Matthews 550 SOUTH FLAGLER DRIVE MGR \_□ Add Suite 900 **■** Remove PALM BEACH, FL 33401 ☐ Change \_□ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove □ Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

Effective date, if other than the date of filing:  (If no effective 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 605.020 Moter. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.  The 90th day after the record is filed.  Dated  ONES ZOBE  Section County Mean Estate Company of State's record of Annabet Company of State's County Mean Estate Company of State's County Mean Estate Company of State's County Mean Estate Company of State County Mean Estate County Me	If amendi	ng any other information	, enter change(s) here: (Al	tuch additional sheets, if necessary.)	
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Filing Fee: \$25.00