

**L14000198014**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : FLORIDA CRYSTALS CORPORATION  
Account Number : I20100000G19  
Phone : (561)366-5138  
Fax Number : (561)366-5180

\*\*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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DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
FCI DEVELOPMENT TEN, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 NOV 18 AM 8:07

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**FC DEVELOPMENT TEN, 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 July 28, 2014 and assigned Florida document number L14000118014.

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: 2199 Ponce de Leon Blvd.  
Suite 201  
Coral Gables, FL 33134

Enter new mailing address, if applicable: P.O. Box 3435  
West Palm Beach, FL 33401

**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: Corporate Creations Network Inc.  
New Registered Office Address: 11380 Prosperity Farms Road, #221E  
*Enter Florida street address*  
Palm Beach Gardens, Florida 33410  
*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 confirm that the limited liability company has been notified in writing of this change.*

Diana Serra Diana Serra, Vice President  
*If Changing Registered Agent, Signature of New Registered Agent*

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  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	FCI Residential Corporation	2199 Ponce de Leon Blvd., Suite 201	<input checked="" type="checkbox"/> Add
		Coral Gables, FL 33134	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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Nov. 18. 2014 11:41AM

No. 4461 P. 4/4  
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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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 November 11, 2014

Signature of a member or authorized representative of a member

**Armando A. Tabernilla, Vice President**

Typed or printed name of signer

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