

L14000154762

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000331922 3))



H180003319223ABCS

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-5383

From: Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.
Account Number : T19990000006
Phone : (407)425-7010
Fax Number : (407)425-2747

SECRETARY OF STATE
TALLAHASSEE FLORIDA

2018 NOV 19 AM 9:41

FILED

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

Email Address: jlagma@wendovergroup.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
THORNTON PLACE DEVELOPER, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

T. CLINE
NOV 20 2018
EXAMINER

2018 NOV 19 PM 3:40

H18000331922 3

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: THORNTON PLACE DEVELOPER, 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:

Amy E. Jellicorse, Esq.
Name of Person
Zimmerman Kiser Sutcliffe, P.A.
Firm/Company
315 E. Robinson Street, Suite 600
Address
Orlando, Florida 32801
City/State and Zip Code
jlagnay@wendovergroup.com
E-mail address: (to be used for future annual report notification)

FILED
2018 NOV 19 AM 9:41
TALLAHASSEE FLORIDA
STATE

For further information concerning this matter, please call:

Amy Jellicorse at (407) 425-7010
Name of Person Area Code 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

H18000331922 3

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Thornton Place Developer, 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 10/03/2014 and assigned Florida document number L14000154762.

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 contain 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED
NOV 19 AM 9:41
TALLAHASSEE FLORIDA

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:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
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.

If Changing Registered Agent, Signature of New Registered Agent

H15000331922 3

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>	<u>Type of Action</u>
MGR and MBR	Jonathan L. Wolf	1105 Kensington Park Dr. Suite 200 Altamonte Springs, Florida 32714	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change
MBR	Glen F. Bamberger	1105 Kensington Park Dr. Suite 200 Altamonte Springs, Florida 32714	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change
MBR	Ryan S. Von Weller	1105 Kensington Park Dr. Suite 200 Altamonte Springs, Florida 32714	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change
MBR	Sara E. Wolf	1105 Kensington Park Dr. Suite 200 Altamonte Springs, Florida 32714	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
MBR	Harrison F. Wolf	1105 Kensington Park Dr. Suite 200 Altamonte Springs, Florida 32714	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
MBR	Affordable Housing Institute, Inc.	2121 Camden Road Suite B Orlando, Florida 32803	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

2018 NOV 19 AM 9:16
 ALL INFORMATION CONTAINED
 HEREIN IS UNCLASSIFIED
 DATE 05-17-2018 BY 60322 JLD/STP/STP

LFD

H19000331922 3

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

2018 NOV 19 AM 9:41
 DEPARTMENT OF STATE
 TALLAHASSEE FLORIDA

FILED

E. Effective date, if other than the date of filing: _____ (optional)
 (If an 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 605.0207 (3)(b)
 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
 (b) The 90th day after the record is filed.

Dated 11/19 2018

 Signature of a member or authorized representative of a member
 Jonathan L. Wolf, Manager and Member

 Typed or printed name of signer