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CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

K. SALY

OCT 14 2016

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: NORTH RIDGE MHP 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:

TOM PEASE

Name of Person

PEASE & MUNDINGER PA

Firm/Company

SUITE 130 CRITERION CENTRE 29605 US HIGHWAY 19

Address

CLEARWATER FL 33761

City/State and Zip Code

peasemundinger@msn.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TOM PEASE

at (727) 785-7460

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

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

NORTHRIDGE MHP LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 12/17/2014 and assigned
Florida document number L14000192506.

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)

2424 50TH AVENUE NORTH

SAINT PETERSBURG, FL 33714

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SUITE 130 CRITERION CENTRE

29605 US HIGHWAY 19

CLEARWATER, FL 33761

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:

TOM PEASE

New Registered Office Address:

SUITE 130 CRITERION CENTRE 29605 US HIGHWAY 19

Enter Florida street address

CLEARWATER

City

Florida 33761

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

* 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>
AMBR	AUSTIN W MCGAVIN	2560 62ND AVENUE NORTH	<input checked="" type="checkbox"/> Add
		SAINT PETERSBURG FL 33702	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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JULIA S. HARRIS, CLERK

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

CHANGED PRINCIPLE ADDRESS, MAILING ADDRESS AND REGISTERED AGENT

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200 OCT 14 PM 2:40
FEDERAL BUREAU OF INVESTIGATION
U.S. DEPARTMENT OF JUSTICE
WASHINGTON, D.C. 20535

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.

(b) The 90th day after the record is filed.

Dated SEPTEMBER 27, 2016

Tom Pearce

Signature of a member or authorized representative of a member

TOM PEASE - CONTROLLER

Typed or printed name of signee