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To:	Division of Co Fax Number	rporations : (850)617-6383	DEC 30
From:	Account Name	: VCORP SERVICES, LLC	<u> </u>
	Account Number Phone Fax Number	: 120080000067 : (845)425-0077 : (845)818-3588	FE S

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

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FM RNC, LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FM RNC, LLC						
( <u>Name of the Limited Limited</u> (A Florida	y Company as it now appears on our records. Limited Liability Company)	1				
The Articles of Organization for this Limited Liability Co Florida document number 1.15000041581	and assigned					
This amendment is submitted to amend the following:						
A. If amending name, cuter the new name of the limi	ted liability company here:					
The new name must be distinguishable and contain the words "Limi	ited Liability Company;" the designation "LLC" (	or the abbreviation SL.L.C."				
Enter new principal offices address, if applicable:		The second second				
(Principal office address MUST BE A STREET ADDR	(ESS)	Dr. pri				
		60 P				
		( T) ( Type				
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BOX)						
	<del></del>					
B. If amending the registered agent and/or registered agent and/or the new registered office address:  New Registered Office Address:		enter the name of the new				
	Ct	£.4				
	, Flor	Zip Code				
New Registered Agent's Signature, if changing Registered	Agent:					
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and co accept the obligations of my position as registered ag being filed to merely reflect a change in the registered company has been notified in writing of this change.	implete performance of my duties, and sent as provided for in Chapter 605, F.	Lam familiar with and S. Or, if this document is				

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

Title	Name	Address	Type of Action
MGR	Hollywood Hills Holdings, LLC	7173 Cypress	DAId
		Ft. Myers. Ft. 33907	■ Remove
			Change
MGR	Jonathan Bleier	7173 Cypress	■ Add
		Ft. Myers, Fl. 33907	☐ Remove
			☐ Change
			Remove  Chinge  Add F
			Remove Change
			□ Add
			☐ Remove
			Change
			□ ∧dđ
			Remove
			☐ Change

	ion, enter change(s) here: (Attach additional shee	
***************************************		
Water and the same		
document's effective date on the Dep	effective date, but not an effective time, at	
Dated December 30	2015	1\3
Renell	Ok.	29 B B B B B B B B B B B B B B B B B B B
Rence Luke, Authorized l	guature of a member or authorized representative of a memb Person	12 (2.5 (2.5 (2.5 (2.5 (2.5 (2.5 (2.5 (2.
	Typed or printed name of signee	
	Page 3 of 3	7.0800.1 3.16.15 2.08.00.1

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