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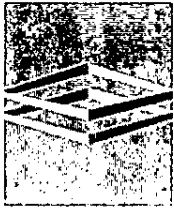
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S. YOUNG

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 AUG 22 PM 4:58



**DUNAY
MISKEL
BACKMAN** LLP

Gary Dunay
Bonnie Miskel
Scott Backman

Hope Calhoun
Dwayne Dickerson
Ele Zachariades

Christina Bitenki
Heather Jo Allen
Andrea Keiser

August 19, 2016

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir or Madam:

Enclosed please find Articles of Amendment to Articles of Organization of
Mystic Bay, LLC together with the filing fee in the amount of \$25.00.

Very truly yours,
DUNAY, MISKEL AND BACKMAN, LLP

Gary S. Dunay

GSD/ld
Enclosure

16 AUG 22 PM 4:58
STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MYSTIC BAY, 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:

Gary S. Dunay, Esq.

Name of Person

Dunay, Miskel and Backman, LLP

Firm/Company

14 SE 4th Street, #36

Address

Boca Raton, FL 33432

City/State and Zip Code

gdunay@dmbblaw.com

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

For further information concerning this matter, please call:

Gary Dunay

561
at (_____) 405-3300

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

16 AUG 22 PM 4:58
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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

MYSTIC BAY, 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 June 16, 2015 and assigned
Florida document number L15000105030.

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)

1400 Post Oak Boulevard

Suite 640

Houston, TX 77056

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1400 Post Oak Boulevard

Suite 640

Houston, TX 77056

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

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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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 STATE OF ALABAMA
 DEPARTMENT OF REVENUE
 TAX ADMINISTRATION

19 AUG 22 PM

11100 STATE
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
19 AUG 22 PM 4: 58

(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)

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 August 15, 2016

Signature of a member or authorized representative of a member

Alberto Sacal, Authorized Representative

Typed or printed name of signee