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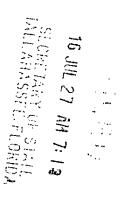
(Requestor's Name)
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 16C-Tiger Point Golf Club, 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:
Eugene J. Garrote
16C-Tiger Point Golf Club, LLC Firm/Company
14900 E Orange Lake Blud #397
City/State and Zip Code ggarrote Dintegritygolf co. com J. mail address: (to be used for future annual report notification)
g a crote a) integrity golf co. com J. Bmail address: (to be used for future annual peport notification)
For further information concerning this matter, please call:
Marisa Izzo at 407 378-4653 × 4504 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

6, LLC							
now appears on our records.) Company)							
led on 09 08 2015 and assigned							
							
mpany here:							
pany," the designation "LLC" or the abbreviation "L.L.C."							
Z Jes							
in the same must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Iter new principal offices address, if applicable: Inter new mailing address, if applicable: Inter ne							
range Lake Blud #397 Enter Florida street address , Florida 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>	Name	Address	Type of Action
Ambr	Davis, William JII	16301 Phil Ritson Way	
		Winter Garden, Fl 34787	Remove
			Change
AMBR	Courrote, Eugene)	Change address to:	🗆 Add
		14900 E Orange Lake Blud #30	☐ Remove
		Kissimmee F1 34747	Change
<u>CF0</u>	Whalley, Edward	Change address tos	□ Add
		14900 E Orange Lake Blud #30	☐ Remove
		Kissimmee, Fl 34747	Change
			
			□ Remove
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Filing Fee: \$25.00