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COVER LETTER

TO: Registration Se Division of Con	ection rporations			
Gonnafly, SUBJECT:	LLC			
30bjEc1:	Name of Lin	nited Liability Company	 	
	Amendment and fee(s) are sub	-		
	Elysia M. Tucci			
		Name of Person		
	RMC Property Group	•		
		Firm/Company		
	8902 N Dale Mabry Hwy,	Suite 200		Z .0
	<u> </u>	Address		1 () () () () () () () () () (
	Tampa, Florida 33614		16 OCT 24	ANASSTE, FLUNDS
		City/State and Zip Code	Z	32.
	etucci@rmcpg.com	,	fication)	ع اوغ پاست تسمو
	E-mail address: (to be used for future annual report noti	fication)	, C
For further information of	concerning this matter, please c	all:	_	, ,
Elysia M. Tucci		813 960-8154		
Name o	of Person	at () Area Code Daytím	e Telephone Number	
Enclosed is a check for ti	he 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)	
	ING ADDRESS:	STREET/COURI		

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gonnafly, LLC		
(Name of the Limited I	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liabi	lity Company were filed on 10/14/16	and assigned
Florida document number L15000174641	_ ,	
This amendment is submitted to amend the followi	ng:	
A. If amending name, enter the new name of th	e limited liability company here:	16 OC
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the	e abbreviation "L.C."
Enter new principal offices address, if applicable	e:	7
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO.	X)	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, ent	er the name of the new
Name of New Registered Agent:		·
New Registered Office Address:		
	Enter Florida street address	
_	, Florida	
	Citv	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>	Address	Type of Action
MGRM	H-2 Investors, LLC	8902 N Dale Mabry Hwy, Ste 200	
		Tampa, Florida 33614	■ Remove
			Change
MGRM	JASL Partners Limited	8902 N Dale Mabry Hwy, Ste 200	⊑ Add
		Tampa, Florida 33614	□ Remove
			Remotive Florida
			Remove
			□ Change
		· 	
			Remove
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in effective date	if other than the is listed, the date me inserted in this	ust be specific	and cannot be pr	ior to date of filing	or more than 90	(optional) g.) Pursuant to 605.02 e will not be listed
cument's effe	ctive date on the	Department (of State's recor	ds.	ning require	ions, ins add	will not be listed
record spe The 90th da	cifies a delay by after the re	ed effectivecord is file	e date, but i ed.	not an effecti	ve time, at	12:01 a.m.	on the earlier
ted Octo	ber 19		2016	<u> </u>			
		Signature o	f a member or au	nthorized represent	tative of a memb	er	

Page 3 of 3

Filing Fee: \$25.00