

LI507186379

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

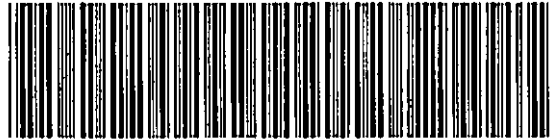
(Business Entity Name)

(Document Number)

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O SIMMONS

APR 25 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: OCP Poinciana, 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:

Brandon J. Bornstein, Esq.

\_\_\_\_\_  
Name of Person

Roman V. Hammes, P.L.

\_\_\_\_\_  
Firm/Company

1920 North Orange Ave., Suite 100

\_\_\_\_\_  
Address

Orlando, Florida 32804

\_\_\_\_\_  
City/State and Zip Code

brandon@romanvhammes.com

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

For further information concerning this matter, please call:

Brandon J. Bornstein

407 650-0003  
at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

OCP Poinciana, 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 11/03/2016 and assigned  
Florida document number L15000186392.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

TENN Poinciana, LLC

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:**

1254 S. John Young Parkway

**(Principal office address MUST BE A STREET ADDRESS)**

Kissimmee, Florida 34741

**Enter new mailing address, if applicable:**

1254 S. John Young Parkway

**(Mailing address MAY BE A POST OFFICE BOX)**

Kissimmee, Florida 34741

**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:

Niles Chalifoux

New Registered Office Address:

1254 S. John Young Parkway

*Enter Florida street address*

Kissimmee

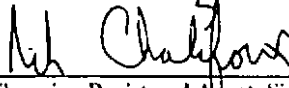
Florida 34741

*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>
MGR	Niles Chalifoux	1254 S. John Young Parkway	<input checked="" type="checkbox"/> Add
		Kissimmee, Florida 34741	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Osprey CRE Funding, LLC	315 South Plant Avenue	<input type="checkbox"/> Add
		Tampa, Florida 33606	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input checked="" 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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CLERK OF COURT  
STATE OF FLORIDA

18 APR 23 PM 2:31  
STATION  
INLET

APR 23 PM 2:31

(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 \_\_\_\_\_, \_\_\_\_\_

Rich Chalfant

Signature of a member or authorized representative of a member

Niles Chalifoux

Typed or printed name of signee