L15000199040

(Re	equestor's Name)				
(Ad	dress)				
(Ad	dress)				
(Cit	ry/State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	isiness Entity Nar	me)			
(Document Number)					
Certified Copies	_ Certificate:	s of Status			
Special Instructions to	Filing Officer:				





700279798827

12/03/15--01011--027 **25.00

2015 DEC - 9 PH 12: 59
SILVEL SANY OF CHARL
TALL ANA SSET FLORIDA

DEC 1 O 2015 J. HARRIS

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

material of the second second

CHIPOLA REVEWAL	uc	· · · · · · · · · · · · · · · · · · ·
(Name of the Limited Liab)	ity Company as it now appears on our reco- a Limited Liability Company)	rds.)
The Articles of Organization for this Limited Liability (Company were filed on 11 25 2	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADD	RESS)	3:: S
		75 [77]
_		SSS - 9
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
•		<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office add		ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street oddre	227
	, F	lorida
	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 **Title** Name | <u>Address</u> Type of Action MGR CHP CHIPOLA MM, LLC 4915 RADFORD AVENUE D Add SUITE 300 _□ Remove RICHMOND, VA 23230 ☐ Change COMMUNITY HOUSING PARTHERS CORPORATION Mar □ Add 448 DEPOT STREET NE E Remove CHRISTIANSBURG, VA 24073 D Add ☐ Remove ☐ Change □ Add □ Remove □ Change □ Add --- □ Refiiove __ □ Change Rentove

☐ Change

D. If amending an	y other information, enter	change(s) here: (Attach	additional sheets, if	necessary.)	
, , , , , , , , , , , , , , , , , , ,		• .			 _
			•		
- · · · · · · · · · · · · · · · · · · ·					
	·				
<u> </u>					
	,		,		<u> </u>
	·····				
	,				
•					
					
E. Effective date, i	if other than the date of fili is listed, the date must be specific a	ing: 1125 15	ng or more than 90 days	optional) after filing.) Pursuant to	o 605.0207 (3)(b)
	inserted in this block does no tive date on the Department of		y filing requirements	s, this date will not be	: listed as the
	cifies a delayed effective y after the record is filed		tive time, at 12:	01 a.m. on the e	arlier of:
Dated	12/3 Juny 8	2015.			
	•	a member or authorized represe		SEUFE ALLAH	
	DAVID SCHU	Typed or printed name of sig	gnee	55 E	
		Page 3 of 3			P4 (1)
		Filing Fee: \$25.00	0		25