116 0000 12112

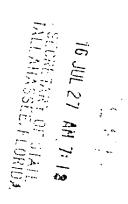
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COVER LETTER

TO: Registration Sect Division of Corpo		•	
SUBJECT: 16C-	Habitat Go Name of Lin	1+ Course, LLC mited Liability Company	
The enclosed Articles of Ar	nendment and fee(s) are su	bmitted for filing.	
Please return all correspond	ence concerning this matte	r to the following:	
	Eugen	Name of Person	e
	16C-Hab.+	at Golf Course, LL Firm/Company	<u></u>
	14900 E	Orange Lake F	3/vd #397
	Kissimm	ee F1 3474	7
~	ggarrot J B-mail address: (ee F1 3474 City/State and Zip Code e D integrity 901f CO to be used for future annual deport notifi	. COM cation)
For further information conc	erning this matter, please c	all:	
Marisa I	1220	at (407) 378-46 Area Code Daytime	53 ×4504
Name of Per	rson	Area Code Daytime	Telephone Number
Enclosed is a check for the fo	ollowing amount:		
□ \$25.00 Filing Fee □	330.00 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

16C- Habitat	Golf Cou	rse, LLC		
(Name of the Limited)	Liability Compan Florida Limited Li	y as it now appears on ability Company)	our records.)	<u>-</u>
The Articles of Organization for this Limited Liabi Florida document number	ility Company v	vere filed on OI	19/2016	_ and assigned
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the			ALLA	7
The new name must be distinguishable and contain the words	"Limited Liability	Company," the design	ation "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applicable			SATE	7
(Principal office address MUST BE A STREET A	DDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u>.</u>	16C - Habito 14900 E Or Kissimmee	at Golf Course ange Lake Bl F1 3474	1 #397
B. If amending the registered agent and/or registered agent and/or the new registered office		e address on our	records, enter the	e name of the new
Name of New Registered Agent:				
New Registered Office Address:	14900	E Orange L		#347
	Kissimi		eei address , Florida	4747 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	Garrote, Eugene J	Change address to:	Add
		14900 E Orange Lake Blud #397	□ Remove
		Kissimmee, Fl 34747	hange
CFO	Whalley, Edward L.	Change address to:	Add
		14900 E Orange Lake Blud #39	7 □ Remove
		Kissimmee, Fl 34747	Change
AMBR	Integrity bolt Company LLC	Change address to:	□ Add
		14900 E Orange Lake Blud #39	7_□ Remove
		Kissimmee, Fl 34747	hehange
			Remove
			Change
			_□ Add
			_□ Remove
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ective date, if other the	an the date of filin	d connet be prior to d	ata of filing or many th	(optional) nan 90 days after filing.) Pursuant to 605.
te: If the date inserted in	this block does not r	meet the applicable	statutory filing req	uirements, this date will not be listed
ument's effective date of	n the Department of S	State's records.		
record specifies a de			n effective time,	, at 12:01 a.m. on the earlie
he 90th day after th		- (
he 90th day after th	\sim 1			
he 90th day after th	21	<u>2016</u>	A /	
he 90th day after th	31	3016	A	
he 90th day after th			/ -1 //	
he 90th day after the			l refresentative of a m	nember

Page 3 of 3

Filing Fee: \$25.00