## LILCOCK 58325

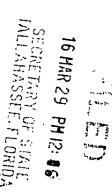
(Re	questor's Name)	·-·· · · · · · · · · · · · · · · · · ·
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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MAR 30 LUID J SHIVERS

Edith Corporation

315 West Barne, Sells 248

Am Arber, ID 48103

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

March 25, 2016

Re: August Realty Capital LLC

Dear Sir or Madam:

Enitia Corporation has been authorized by Jeremy L. Gordon to file the enclosed amendment for August Realty Capital LLC.

If you need any additional information, you can reach us at

1-877-281-6496 (toll free) documents@directincorporation.com

We have enclosed an additional \$5.00 for one "Certificate of Status". For your convenience, I have enclosed a self-addressed envelope.

Thank you,

Ed Stahlin Enitia Corporation

## **COVER LETTER**

Division of Co	rporations		
CT I'm Will com	alty Capital LLC		
SOBJECT.	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Edward Stahlin		
		Name of Person	
	Direct Incorporation		
		Firm/Company	·····
	315 W Huron St STE 240		
		Address	· · · · · · · · · · · · · · · · · · ·
	Ann Arbor, MI 48103		
	1	City/State and Zip Code	
	documents@directincorpora		, <u>.</u>
	E-mail address: (	to be used for future annual report notifi	ication)
For further information	concerning this matter, please ca	all:	
Edward Stahlin		877 281-6496 at ( )	
Name	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for	the 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)

**MAILING ADDRESS:** 

Registration Section

TO:

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

August Realty Capital Ll		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L16000058329	were filed on 3/22/2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:	390 North Orange Avenue Suite 2300	
(Principal office address MUST BE A STREET ADDRESS)	Orlando, FL	
	32801	
Enter new mailing address, if applicable:	424 E Central Blvd #117	
(Mailing address MAY BE A POST OFFICE BOX)	Orlando, FL	
	32801	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.  Name of New Registered Agent:  New Registered Office Address:		HAR 29 PH 12
<del></del>	, riorida <sup>r</sup>	7in 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	Jeremy L Gordon	424 E Central Blvd #117	
		Orlando, FL	Remove
		32801	■ Change
	***************************************		
			□ Remove
			☐ Change
			☐ Remove
			☐ Change
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	OR	<u>.</u>
ective date, if other than the date of filing:	(optional)	ΦÜ
n effective date is listed, the date must be specific and cannot be prior to date of filing of te: If the date inserted in this block does not meet the applicable statutory from the date on the Department of State's records.		not be listed
record specifies a delayed effective date, but not an effectiv	e time, at 12:01 a.m. on	the earlier
ted 3/25 , 2016 .		
Non Ll Sel	•	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00