

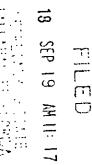
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COVER LETTER

Division of Cor	porations		
	ON APARTMENTS, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	EDWARD G. MILGRIM,	ESQ.	
		Name of Person	
	EDWARD G. MILGRIM,	P.A.	
		Firm/Company	
	3216 CORINNE DRIVE		
		Address	
	ORLANDO, FL 32803		
		City/State and Zip Code	<u> </u>
	edwardmilgrim@	•	
	E-mail address: (to be used for future annual report notific	cation)
For further information e	oncerning this matter, please co	all:	
EDWARD MILGRIM		407 790-4966 at ()	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	ne 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:

TO:

Registration Section

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

(Name of the Limi	ted Liability Company as it now (A Florida Limited Liability Com	appears on our records.)
The Articles of Organization for this Limited L Florida document number <u>L16000059618</u>	iability Company were filed	on MARCH 24, 2016 and assigned
This amendment is submitted to amend the fol	owing:	
A. If amending name, enter the new name of	of the limited liability comp	any here:
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 appli	cable:	
Principal office address MUST BE A STRE		7
		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and registered agent and/or the new registered of		ess on our records, enter the name of the
Name of New Registered Agent:	REMINGTON APARTME	ENTS MANAGEMENT, INC.
New Registered Office Address:	6031 OLD CHENEY HIG	SHWAY, UNIT 37
	En	ster Florida street address
	ORLANDO	, Florida 32807
	Ciry	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

EMPLOYON ADADTMENTS 110

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.

KENNETH B. CORNELL, PRESIDENT

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
MGR	REMINGTON APARTMENTS MANAGEMENT, INC.	6031 OLD CHENEY HIGHWAY	
		UNIT 37	_
			□ Remove
		ORLANDO, FL 32807	
			Change
AMBR	BROOKFIELD INVESTMENTS, LLC	6031 OLD CHENEY HIGHWAY	
	HAVESTINEINTS, LEG		□ Add
		UNIT 37	
			Remove
		ORLANDO, FL 32807	
			Change
			□ Remove
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ective date, if other than the date of filing: 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.
ie: If the date inserted in this block does not meet the apument's effective date on the Department of State's rec	pplicable statutory filing requirements, this date will not be listed tords
anient 5 chacing and on the property	
record specifies a delayed effective date, bu	it not an effective time, at 12:01 a.m. on the earlie
he 90th day after the record is filed.	and an endeduce time, at 12702 and an and conne
ed SEPTEMBER 14 2018	
	$\sqrt{1}$

Typed or printed name of signee

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Filing Fee: \$25.00