16000113297

(Requestor's Name)
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BECRETARY OF STATE
ALLAHASSEE, FLORID

PROPERTY.



JUN 2 7 2016 Y SULKER CORPORATION SERVICE COMPANY
1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 192805 7567450

AUTHORIZATION : True Service Cost Limit : \$ 25.00

ORDER DATE : June 24, 2016

ORDER TIME : 3:45 PM

ORDER NO. : 192805-005

DOMESTIC AMENDMENT FILING

NAME: AF TAMPA HOLDINGS, LLC

EFFECTIVE DATE:

CUSTOMER NO: 7567450

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER'S INITIALS:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AF TAMPA HOLDINGS, 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 Liab Florida document number L16000113297	pility Company were filed on June 14, 2016	and assigned
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of t	he limited liability company here:	
MDK TELETOWER, LLC		
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, ente	TALLAH SSEE AMORIO
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Fig	
	, Florida	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>	Type of Action		
AMBR	Amzak Capital Management, LLC	980 North Federal Highway			
		Suite 315, Boca Raton, FL 33432	■ Remove		
			□ Change		
AMBR	Michael David Kazma	980 North Federal Highway	= Add		
		Suite 315, Boca Raton, FL 33432	□ Remove		
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Effective date, if other than the date if an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Depa	specific and cannot be prior to does not meet the applicable	statutory filing requirement	ents, this date will	suant to 6 not be li	i05.0207 isted as
ne record specifies a delayed en The 90th day after the record	fective date, but not ar is filed.	n effective time, at 1	2:01 a.m. on t	he ear	lier of
Dated	2016				
	2				
Sig.	nature of a member or authorized	I representative of a member			

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Filing Fee: \$25.00