7/17/2017

Division of Corporations

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Phone : (323)962-8600 Fax Number : (323)962-3889

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RIFFIN FLORIDA REAL ESTATE INVESTMENT TRUST, LLC

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COVER LETTER

	gistration Sec vision of Corp		A		
		LORIDA REAL ESTATE II	NVESTMENT TRUST, LLC		
SUBJECT:		Name of Limite	d Liability Company		
		mendment and fee(x) are submidence concerning this matter to			
		Cheyenne Moseley			
		-	Name of Person	<u></u>	
		Legalzoom.com, Inc.			
Fmm/Company					
		101 N. Brand Blvd., 11th	Floor		
			Address		
		Glendale, CA 91203		SECRE MAY OF STALL AHASSEE, FLOR	-
			Ciry/State and Zip Code	AH AREI	
		xxray047@gmail.com	and an	SS -	1
			o be used for future annual report notificat		
For further	information co	oncerning this matter, please ca	<u>ll'</u>		
Cheyenne	e Moseley		800 773-0888 ext.	9724 <u></u>	
	Name of	Person	Arta Code Daytime Te	lephone Number	
Enclosed i	a a check for th	e following amount:			
) Filing Fee	El \$30,00 Filing Fee & Certificate of Status	© \$55.00 Filing Fee & Certified Copy (withinsal copy is ruckised)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	- •	ING ADDRESS:	STREET/COURLER Registration Section	ADDRESS:	

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Division of Corporations
Clitton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GRIFFIN FLORIDA REAL ESTATE INVESTMI	ENT TRUST, LLC	
(Name of the Limited Liability Compan (A Florida Limited Li	y as It now sopears on our rectability Company)	ords.)
The Articles of Organization for this Limited Liability Company v Florida document number <u>L16000134579</u>	were filed on 07/18/2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited tiabil	Sty company here:	
Griffin Florida IRA Real Estate Investment Trust, LLC		
The new name must be distinguishable and end with the words "Limited Liabil	lity Company," the designation "	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY RE A POST OFFICE BOX) 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:	fice address on our reco	SECRETARY OF THE Name of the Internation of the Int
New Registered Office Address:	Enter Florida street ad	dress
		, Florida
	City	Zip Code
New Registered Agent's Signature, it changing Registered Agent; I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change	performance of my duties provided for in Chapter 60	s, and I am jamiliar with and 05, F.S. Or, if this document is
If Cher	nging Registered Agent, Signat	ury of New Registered Agent

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = M$	lanager authorized Member		
Title	Name	Address	Type of Action
		·	Add
			□ Remove
			Remove
			Add Sicon Remove
			HASSEE, FLORIDA
			☐ Add
			☐ Add

). If amending any other information, enter change(s) here: (Attach ad	lditional sheets, if necessary.)
	<u> </u>
Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of receipt or filed date and cathed date this document is filed by the Florida Department of State) Dated	(optional) smot be more than 90 days after
Jagay J Seff	station of a member
Gregory J. Griffin	
Typed or printed name of sign	DEC.

Page 3 of 3

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