Division of Corporations

Page 1 of 2

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

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From:

Rosa Wong, Paralegal

Account Name : AKERMAN LLP - MIAMI

Account Number : 075471001363 Phone

Fax Number

: (305)374-5600 : (305)374-5095

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RP I-DRIVE LLC

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Corporate Filing Menu

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H18000099425 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

_ 	DRIVE LLC		
(Name of the Limited Liability ((A Florida Li	ompany as it now appears on our reconniced Liability Company)	(43.)	
The Articles of Organization for this Limited Liability Con	pany were filed E September 15, 2	2016 and assigned	
Florida document number L16000172598			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	d liability company here:		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "Ll	.C" or the abbreviation "L.L.C."	,
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	25)		_
			. !
	District March VI		
Enter new mailing address, if applicable:	928 - 2 2 2 2 3	ု ရွိ ့ တ	e de la
(Mailing address MAY BE A POST OFFICE BOX)	j	P.	
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		5.	
B. If amending the registered agent and/or registered agent and/or the new registered office addre			<u>new</u>
Name of New Registered Agent:	2000 - 100 -		-
New Registered Office Address:			_
	Enter Florida street add	ress	
		Florida	_
	Clay	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

131

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Page 1 of 3

H18000099425 3

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

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Title	Name	Address	Type of Action
MGR	RP-1 Drive Manager, LLC	2750 SW 145 Avenue	D Ad d
		Suite 106	■ Remove
		Miramar, Florida 23027	Change
MGR	RPI Drive Manager LLC	2750 SW 145 Averue	Add
		Suite 106	■ Remove
		Miramar, Florida 33027	□ Change
MGR	RP I-Drive Manager, LLC	2750 SW 145 Ave ue	■ Add
		Suite 106	Remove
		Miramar, Florida 33027	Change
			DAdd
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The 90th day after the record is med	•	
Dated March	., 2018	
Signature of a	member or authorized representative of a member	
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Page 3 of 3

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