Division of Corporations

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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 323 LANTANA ROAD LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

323 LANTANA ROAD LLC (Name of the Limited Liability Company (A Florida Limited Lia	as it now appears	on our records.)
(A Floridu Limited Lia	hility Company)	
The Articles of Organization for this Limited Liability Company w	ere filed on 09/2	9/2016 and assigned
Florida document number £16000182127		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company her	<u>r</u> :
327 Lantana Road, LLC		
The new name must be distinguishable and contain the words "Limited Liability	Company," the des	signation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		- - 1
(Principal office address MUST BE A STREET ADDRESS)		1
Trinipa office address (4051 BE A STREET ADDRESS)		· · · · ·
		~
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		F
3. If amending the registered agent and/or registered office address here: Name of New Registered Agent:	ce address on	our records, enter the name of the
New Registered Office Address:	Forer Marie	da street address
	1200 11020	ar ou fer than 633
	City	, Florida
North Action 1 Action	City	z.p Cock
New Registered Agent's Signature, if changing Registered Agent;		
l hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p	erformance of n	ny 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

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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
			□ Remove
			☐ Change
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Note:	If the date inserted in the	his block does not	t meet the applic	able statutory filip	ng requirements, th	nis date will not be	listed
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