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D. SCOTT DEC 4 2017

COVER LETTER

	gistration Sec ision of Corp		eV		
		lave at Northshore, LLC	£14		
SUBJECT:		Name of Limi	ited Liability Company		
The enclosed	d Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please returr	all correspor	ndence concerning this matter	to the following:		
		Misty Kent			
			Name of Person		
		Royal American Companie	2 S		
			Firm/Company		
1002 W. 23rd St., Ste. 400 Address					
		Panama City, FL 32405			
		-	City/State and Zip Code		•
		misty.kent@royalamerican.			ing Fee.
		E-mail address: (1	to be used for future annual report	notification)	-
For further i	nformation co	oncerning this matter, please ca	ıli:		
Misty Kent			850 914-323-		. `
	Name of	Person	at () Area Code Day	rtime Telephone Number	_U
Enclosed is	a check for th	e following amount:			
□ \$25.00 J	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (of Status &

MAILING ADDRESS: 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

ility Company as it now appears on our recorda Limited Liability Company)	<u>ds.</u>)
Company were filed on 11/08/2016	and assigned
·	
mited liability company here:	
imited Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
DRESS)	
	*- **
	-
	<u> </u>
gistered office address on our record dress here:	is, enter the name of the n
Enter Florida street addre	255
F	lorida Zip Code
	mited liability company here: imited Liability Company," the designation "LE DRESS) gistered office address on our record idress here: Enter Florida street address. F

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>	Address	Type of Action
MGŔ	Southern Coastal Mortgage Co	1002 W. 23rd St., Stc. 400	Add
		Panama City, FL 32405	☐ Remove
			Change
MGR	Waddell Plantation, Inc.	1002 W. 23rd St., Ste. 400	Add
		Panama City, FL 32405	□ Remove
			☐ Change
AMBR	Southern Coastal Mortgage Co	1002 W. 23rd St., Ste. 400	
		Panama City, FL 32405	■ Remove
			Change
AMBR	Waddell Plantation, Inc.	1002 W. 23rd St., Ste. 400	Add
		Panama City, Fl. 32405	☐ Remove
			□ Change
			□ Remove
			Change
			□ Remove
			☐ Change

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OF	date, if other than the date of filing:	(optional)	- .	-· -
an effectiv <u>(ote:</u> If t	ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 the date inserted in this block does not meet the applicable statutory filing requirem is effective date on the Department of State's records.	days after filing.) Pu		
e record	d specifies a delayed effective date, but not an effective time, at	12:01 a.m. on	the ear	lier of
	Oth day after the record is filed.			
The 90	Oth day after the record is filed.			
The 90		er		

Page 3 of 3

Filing Fee: \$25.00