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(Re	questor's Name)	
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(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:		
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SECKETARY OF STATE
TALLAHASSEE, FLORIDA

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K. SALY FEB - 1 2017

COVER LETTER

TO:	Registration St Division of Cor			
SUBJEC		D DEVELOPMENT, LLC		
SUBJEC	C1;	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		JODY D. RADCLIFF CP		
			Name of Person	
		JODY D. RADCLIFF CPA	A, LLC	
			Firm/Company	
		870 DUNLAWTON AVE	STE #309	ress d Zip Code dure annual report notification) 6 788-8680 a Code Daytime Telephone Number Filing Fee & Certificate of Status & Certificat Copy (additional copy is enclosed) STREET/COURIER ADDRESS: Registration Section
			Address	
		PORT ORANGE, FL 3212	27	
			City/State and Zip Code	
		payroll@jodyradcliffcpa.co		
For furth	er information c	oncerning this matter, please co	•	
JODY D	D. RADCLIFF C	PA		
	Name o	f Person	at () Area Code Daytime Telepho	ne Number
Enclosed	l is a check for th	ne following amount:		
■ \$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
	Registr Divisio	ING ADDRESS: ation Section on of Corporations ox 6327		

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILE.	
2017 JAN 20	
2017 JAN 30 PM 2: 2	8

A.B. LAND DEVELOPMENT, LLC

A.B. LAND DEVELOTWENT, LLC		TARKUPA " " 7 2. 3.
(<u>Name of the Limited Liability C</u> (A Florida Lin	Company as it now appears on our reconited Liability Company)	ords. LAHASS OF S
· · · · · · · · · · · · · · · · · · ·		SEE. FLORIS
The Articles of Organization for this Limited Liability Comp		and assigned
Florida document number L16000231550		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "I	.LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES.	·	
Frincipal Office dudress MOST BE A STREET ADDRES.	<u>ച</u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere	ed office address on our reco	rds, enter the name of the n
registered agent and/or the new registered office address	<u>s here</u> :	
Name of New Registered Agent:		
•		
New Registered Office Address:	Enter Florida street ada	dross
	Emer Frontal Street and	11 8110
		Florida
	City	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	RYAN BLAIDA	204 4th Street, Osteen, FL 32764	⊟ Add
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fective date, if other than the n effective date is listed, the date mu	date of filing	cannot be prior t	o date of filing or	more than 90 days a	ptional) ifter filing.) Pursuant to 6	05.0207
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record specifies a delayed The 90th day after the rec		ate, but not	an effective	time, at 12:0	1 a.m. on the ear	lier of
The John day after the rec	oru is incu.					
January 11th	,	2017	_ ·			
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00