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(Re	questor's Name)	
(Ad	dress)	,
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(Cit	ry/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Do	cument Number)	1
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COVER LETTER

TO: Registration Solution of Con			
SP CA Ap	artments LLC		
SUBJECT:	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub-	_	
	Jeffrey C. Steinert		
	. ———	Name of Person	<u>. </u>
	Pepple Cantu Schmidt PLI	LC .	
		Firm/Company	
	1000 2nd Avenue, Suite 29	950	
•		Address	
	Seattle, WA 98104		
	IOTERIERT ORGELEGAL	City/State and Zip Code	
	JSTEINERT@PCSLEGAL E-mail address: (i	to be used for future annual report notif	ication)
For further information of	concerning this matter, please ca	ail:	
Jeffrey C. Steinert		206 625-9984	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

SP CA APARIMENTS LLC		
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab Florida document number <u>L17000010778</u>	oility Company were filed on January 13, 2017	and assigned
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of t	he limited liability company here:	# 1 H
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation "LLC" or the	abbreviation L.C.3
Enter new principal offices address, if applicab	ele:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>ent</u> e <u>e address here</u> :	er the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	Zip Code
	City	гір Соае

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
MGR	SP and MS LLC	5403 West Gray Street	
		Tampa, FL 33609	Remove
			Change
MGR	SP CA Manager LLC	5403 West Gray Street	
		Tampa, FL 33609	□ Remove
•		· · · · · · · · · · · · · · · · · · ·	Change
			□ Remove
			Change
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iffec f an c	ctive date, if oth Mective date is liste	n er than the d ed, the date must t	ate of filing	g:	ior to date of	filing or more t	opt han 90 days afte	ional) er filing.) Pue	want to 605.0207 (
Note	: If the date inse ment's effective	rted in this bloc	k does not n	neet the app	licable statu	tory filing rea	quirements, th	is date will:	not be listed as t
ne re Th	ecord specifie e 90th day af	s a delayed of ter the recor	effective of the file of the f	date, but	not an eff	ective time	e, at 12:01	a.m. on t	he earlier of:
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Dated		ax as		, <u>w</u>	<u></u> .				
		, ,							

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00