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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (614)280-3338

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CINNAMON FERN 57 AT ROSA LLC

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			COVER LETTER		
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SUBJECT:		N FERN 57 AT ROSA LLC			
SUBJECT:	.,	Name of Lin	ited Liability Company		
The encloses	d Anicles of .	Amendment and fee(s) are sub	mitted for filing.		
Please return	ali correspo	ndence concerning this matter	to the following:		
		KENNETH BECKMAN,	ESQ.		
			Name of Person		
		BAKER DONELSON BE	ARMAN CALDWELL & I	BERKOWITZ, P.C.	
			Firm/Company		7
		1900 REPUBLIC CENTR	E, 633 CHESTNUT STREE	et	TT FEB -7 AM 8: 01
			Address	,	1, 5,
		CHATTANOOGA, TENN	IESSEE 37450		7 SEE.
			City/State and Zip Code		0
		jszieg59@yahoo.com			8: O
			to be used for future annual rep	oort notification)	:
For further in	oformation co	ncerning this matter, please co	all:		
CISSY CLA	RKE		901 577-3 at ()		
	Name of	Person	Area Code	Daytime Telephone Number	
Enclosed is a	check for th	e following amount:			
□ \$25.00 F	iling Fcc	☐ \$30.00 Filing Fce & Certificate of Status	\$55.00 Filing Fee & Certified Copy	☐ \$60.00 Filing Fe Certificate of S	

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Certified Copy

(additional copy is enclosed)

Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

(additional copy is enclosed)

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CINNAMON FERN 57 AT ROSA LLC		
(Name of the Limited Liability Compa) (A Florida Limited L	ny as it new appears on our record liability Company)	<u>(9.)</u>
The Articles of Organization for this Limited Liability Company	were filed on February 6, 2017	, and assigned
Florida document number L17000027298		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
21 CINNAMON FERN ROSA LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4 T	3 25
(Principal office address MUST BE A STREET ADDRESS)		一
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	——————————————————————————————————————	©
		으 중취
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		s, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	55
	, Fl	orlda
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent;	•	
hereby accept the appointment as registered agent und agre	e to act in this capacity. I fu	rther 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

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = A	uthorized Member		
<u>Title</u>	Name	Address	Type of Action
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			□ Remove
			Change
			D Add
			□ Remove
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Dated February 7, 2017 Signature of a member or authorized representative of a member	fan e Note docu ne re	If the dat ment's effe ecord spe e 90th d	ective date ecifies a ay after	delaÿe	ed effectord is	tive dat filed.	Nau	- 10e-			01 a.n	n. on t	he ear	iler of

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