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To:

Division of Corporations -

Fax Number

: (850)617-6383

From:

Account Name : EQUITY ONE, INC.

Account Number: 120030000110

Phone Fax Number

(305) 947-1664

904-354-1832

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LOUISIANA HOLDING LLC Certificate of Status Certified Copy 0

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Electronic Filing Menu

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D. SCOTT

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

đ.

| Louisiana Holding LLC  |  |  |                                  |            |
|--|--|--|----------------------------------|------------|
| (Name of the Limit   | ed Liebility Compa<br>(A Florida Limited | tny as it now appears on our rec<br>Liability Company) | ords.)                           |            |
| The Articles of Organization for this Limited L Florida document number L17000041935   | iability Company                         | were filed on February 23, 2                           | 017 and assigned                 |            |
| This amendment is submitted to amend the following   | owing:                                   |  |                                  |            |
| A. If amending name, enter the new name of   | the limited liab                         | ility company here:                                    |                                  |            |
| The new name must be distinguishable and contain the w   | ords "Limited Liabi                      | lity Company," the designation "I                      | LC" or the abbreviation "L.L.C." | -          |
| Enter new principal offices address, if applicable:  |  | One Independent Drive, Su                              | to 114                           |            |
| Principal office address MUST BE A STREET ADDRESS)   |  | Jacksonville, FL 32202                                 |                                  |            |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  |  | One Independent Drive, Sui                             | te 114                           | <b>-</b>   |
| B. If amending the registered agent and/registered agent and/or the new registered of  Name of New Registered Agent:  New Registered Office Address: | F&L Corp                                 |  | rds, enter the name of the       | MESTY FILE |
| Ivew Registered Office Address.  | Enter Florida street address             |  | vern                             | - C        |
| •  | Jacksonville                             | G/by -   | Florida 32202 G                  | ٠<br>ج     |
| New Registered Agent's Signature, if changing R  | egistered Agent:                         | ong.   | عام رساق                         | ית         |
|  |  |  | A                                | .1         |

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.

Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

| <b>(((H17</b> May. 3. 2017)), 2:03Pl | (H17 <sup>May.</sup> | 3. | 2017 <sub>1</sub> | 2: | 0391 |
|--------------------------------------|----------------------|----|-------------------|----|------|
|--------------------------------------|----------------------|----|-------------------|----|------|

No. 0009 P. 3/4

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> | Name                  | Address                          | Type of Action |
|--------------|-----------------------|----------------------------------|----------------|
| AMBR         | Equity One, Inc.      | 1600 NE Miami Gardens Drive      |                |
|              |                       | North Miami Beach, FL 33179      | Remove         |
|              |                       |                                  | ☐ Change       |
| MGR          | Regency Centers, L.P. | One Independent Drive, Suite 114 | Add            |
|              |                       | Jacksonville, FL 32202           | ☐ Remove       |
|              |                       |                                  | ☐ Change       |
|              |                       | <u>fi</u>                        |                |
|              |                       |                                  | □ Remove       |
|              |                       |                                  | ☐ Change       |
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|              |                       |                                  | Change I       |
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|              | •                     |                                  | D'Remove       |
|              |                       | 4                                | ☐ Change       |
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|              |                       |                                  | □ Remove       |
|              |                       |                                  | Change         |

| · · · · · · · · · · · · · · · · · · · | 2017 <sub>3</sub> , 2:03PM  |                                       | Za. W. dittor. W. d.         | No. 0009 P.                                  | 7,    |
|---------------------------------------|---|---------------------------------------|------------------------------|--|-------|
| D. Hame                               | nding any other information   | n, enter change(s) here:              | (Attach additional shee      | is, if necessary.)                           |       |
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| E. Effecti                            | ve date, if other than the da   | te of filing:                         | 44.                          | — (obttotini) — 🖂 🗥                          | . 00/ |
| Note:                                 | ective date is listed, the date must be<br>If the date inserted in this block | does not meet the applicab            | le statutory filing requiren | nents, this date will-not be list            | ed a  |
| docume                                | ent's effective date on the Depa  | atment of State's records.            |                              | 705  | ١.    |
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| (b) The                               | 90th day after the record   | d is filed.                           |                              |  | Ų,    |
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|                                       | Barbara C. Johnston   |                                       |                              |  |       |
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