



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H17000121544 3)))



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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : EQUITY ONE, INC.
Account Number : I20030000110
Phone : (305) 947-1664
Fax Number : [REDACTED]

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.

Email Address: _____

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SECURITIES DIVISION
TALLAHASSEE, FLORIDA

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
EQUITY ASSET INVESTOR (TALEGA) LLC

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Help MAY 04 2017

May. 3. 2017 1:50PM

No. 0005 P. 2/4

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

EQUITY ASSET INVESTOR (TALEGA) LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on February 23, 2017 and assigned
Florida document number L17000042013

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 "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

One Independent Drive, Suite 114

(Principal office address MUST BE A STREET ADDRESS)

Jacksonville, FL 32202

Enter new mailing address, if applicable:

One Independent Drive, Suite 114

(Mailing address MAY BE A POST OFFICE BOX)

Jacksonville, FL 32202

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

F&L Corp

New Registered Office Address:

One Independent Drive, Suite 1300

Enter Florida street address

Jacksonville

Florida 32202

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.

Charles V. Skidell

If Changing Registered Agent, Signature of New Registered Agent

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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>	<u>Type of Action</u>
AMBR	Equity One, Inc.	1600 NE Miami Gardens Drive	<input type="checkbox"/> Add
		North Miami Beach, FL 33179	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Regency Centers, L.P.	One Independent Drive, Suite 114	<input checked="" type="checkbox"/> Add
		Jacksonville, FL 32202	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a **delayed effective date**, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated May 2nd, 2017

Budene C. Johnson
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Barbara C. Johnston

Typed or printed name of signee

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Filing Fee: \$25.00

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