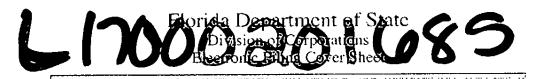
Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)694-1639

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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JMNR HOLDINGS LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IMNR HOLDINGS LLC		
(Name of the Limited Lindity (A Florida L.	Company as it now appears on our records, imited Liability Company)	
The Articles of Organization for this Limited Liability Con	mpany were filed on September 28, 2017	and assigned
Florida document number 1.17000201685	<i>,</i>	
This amendment is submitted to amend the following:		
A. If smending name, enter the new name of the limite	ed liability company here:	
PARKWAY CHICAGO LLC		r.5
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u>* </u>
(Principal office address MUST BE A STREET ADDRE	<u></u>	<u>~</u>
		* .
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office addre	red office address on our records,	enter the name of the n
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
***************************************	City, Floi	rida
and the second s	- 7	•

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

•

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 = Authorized Member			
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			D_Add
			□ Add
			Change

fective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to date te: If the date inserted in this block does not meet the applicable sta cument's effective date on the Department of State's records.	atmory filing requirements, this date will not be listed
record specifies a delayed effective date, but not an effice 90th day after the record is filed.	effective time, at 12:01 a.m. on the earlier
ted January 12th	
	. 25
Signature of a retimber of a retimber of a retimber	apresentative of a member
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