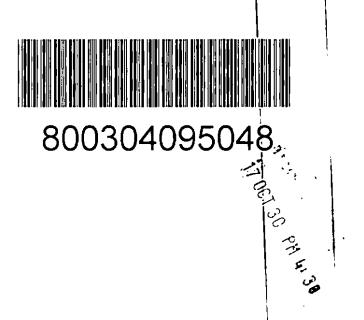
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Office Use Only



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NOV 0 1 2017 Y SULKER CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 889639 80690A

AUTHORIZATION

COST LIMIT

ORDER DATE: October 30, 2017

ORDER TIME : 4:06 PM

ORDER NO. : 889639-005

CUSTOMER NO:

80690A

## DOMESTIC AMENDMENT FILING

NAME:

TAMPA PROPERTY PARTNERS II,

LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY \_\_\_ PLAIN STAMPED COPY

\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER'S INITIALS:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TAMPA PROPERTY PARTNERS II, 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 10/16/2017 and assigned Florida document number \_L17000213592 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: TAMPA XYZ, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC?" Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: άò New Registered Office Address: Enter Florida street address တ Florida 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.

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

or removed from our records: MGR = Manager AMBR = Authorized Member Type of Action <u>Address</u> <u>Title</u> <u>Name</u> \_□ Add \_□ Remove ☐ Change □ Add \_□ Remove \_□ Change □ Add □ Remove \_□ Change *∰* \_□ Remove ∵\_□ Change ĸ □ Remove \_□ Change □ Add □ Remove \_D Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

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	Signature of a member or authorized representative of a member	1	).
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Page 3 of 3

Filing Fee: \$25.00