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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TAVISTOCK DEVELOPMENT

Account Number : I20170000084 : (407)909-9957 Phone : (407)909-9957 Fax Number

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

Email Address:____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LN SIGNET, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

2:19

Electronic Filing Menu Corporate Filing Menu

Help

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	Name of Person
avistock Financial, LLC	
	Firm/Company
9350 Conroy Windermere Ro	ad
	Address
Vindermere, FL 3476	
	Cny/State and Zip Code
ichelle.dadisman@tavistock.	com

For further information concerning this matter, please call:

Michelle Dadisman	407	909-9957
Name of Person	at () Area Code	Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OF MARON 13 P 2 14

LN Signet, LLC

(<u>Name of the Limited Lia</u> (A Flo	ability Company as it now appears on our records.), orda Limited Liability Company)	La rein
The Articles of Organization for this Limited Liability Florida document number L17000235668	ty Company were filed on November 15, 2017	
This amendment is submitted to amend the following	<u> </u>	
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:		
(Principal office address MUST BE A STREET AL	ODRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	2	
B. If amending the registered agent and/or re registered agent and/or the new registered office :		the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	ent contain	
	, Florida,	Zıp 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 campany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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

Title	Name	Address	Type of Action
VP, T	Jeffrey S. Smith	6900 Tavistock Lakes Blvd.	
		Suite 200	■ Remove
		Orlando, FL 32827	·····
VP, T	Benjamin A. Weaver	6900 Tavistock Lakes Blvd.,	Change
· 		Suite 200	■ Add
		Ode de 61 22027	□ Remove
		Orlando, F1, 32827	☐ Change
			Add
			□ Remove
			Change
			□ Remove
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Note:	ive date, if other than the date of filing: ective date is listed, the date must be specific and cannot be If the date inserted in this block does not meet the ent's effective date on the Department of State's re	applicable statutory filing i	(optional) than 90 days after filing.) Pursuant to equirements, this date will not be l	505.0207 isted as t
	ord specifies a delayed effective date, b 90th day after the record is filed.	ut not an effective tim	ne, at 12:01 a.m. on the ea	rlier of
Dated .	Natember 13 . 201	<u> </u>		

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Typed or printed name of signee

Filing Fee: \$25.00