L18000048672

| (Requ | estor's Name |) |
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| PICK-UP | ☐ WAIT | MAIL |
| (Busir | ness Entity Na | nme) |
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| Certified Copies | Certificate | es of Status |
| Special Instructions to Fil | ing Officer: | |
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COVER LETTER

| Division of Co | rporations | | |
|--|----------------------------------|---|------------------|
| | ST 8040 ULMERTON ROAD | LARGO FLORIDA LANDCO L | |
| at () Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$25.00 Filing Fee Certificate of Status \$25.00 Filing Fee & □ \$30.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status | | | |
| | | | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | Jose L. Torres | | |
| | | Name of Person | |
| | Jose L. Torres, P.A. | | |
| | | Firm/Company | |
| | 201 Madeira Avenue | | |
| | | Address | |
| | Coral Gables, FL 33134 | | |
| | fli@fg-companies.com | City/State and Zip Code | |
| | E-mail address: (| to be used for future annual report notifi- | cation) |
| For further information of | oncerning this matter, please ca | all: | |
| Pun For Li | | | |
| Name o | f Person | Area Code Daytime | Telephone Number |
| | | | |
| Enclosed is a check for t | he following amount: | | |
| \$25.00 Filing Fee | - | | |

MAILING ADDRESS:

TO:

Registration Section

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

AFC-WEST 8040 ULMERTON ROAD LARGO FLORIDA LANDCO 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 Comp | oany were filed on 02/23/201 | 8 and assigned |
|---|--|---|
| Florida document number L18000048672 | | |
| 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 I | .iability Company," the designation | on "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDRESS | 5) | 51V.8 |
| Trincipal office address MOST DL ASTREET ADDRES | _ | Sic Sic |
| | | - SET |
| Francisco (Proceedings (Constitution) | | م رويدار |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BOX) | - | PORALICO O |
| | | <u> </u> |
| B. If amending the registered agent and/or registered registered agent and/or the new registered office address Name of New Registered Agent: | | ecords, enter the name of the nev |
| New Registered Office Address: | | |
| The Wilestone Office Praincip. | Enter Florida stree | t address |
| | | . Florida |
| | City | , Florida |
| New Registered Agent's Signature, if changing Registered Agent | ent: | |
| I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compacted the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change. | lete performance of my dut as provided for in Chapter | ies, and I am familiar with and 605, F.S. Or, if this document is |
| īre | Changing Registered Agent, <u>Sig</u> | nature 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

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|---------------------|-------------------------------------|----------------|
| | FGGF VENTURES LLC | 201 Madeira Avenue | |
| MGR | | | □ Add |
| | | Coral Gables, FL 33137 | _ _ |
| | | | ■ Remove |
| | | | |
| | | | Change |
| | AMAZONIA CONSULTING | 299 Alhambra Circle | U Change |
| MGR | GROUP, LLC | 255 Amanibia Orde | 7 |
| | | S.::- 540 | Add |
| | | Suite 510 Coral Gables, FL 33134 | |
| | | | Remove |
| | | | |
| | | | □ Change |
| MGR | FG-MGR, LLC | 14103 Chinkapin Drive | |
| | | Rockville, MD 20850 | ∃ Add |
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| | | | □ Remove |
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| ffective date, if other than the date an effective date is listed, the date must be tote: If the date inserted in this block ocument's effective date on the Department. | specific and cannot be prior does not meet the applic | able statutory filing | | g.) Pursuant to 605. | |
| e record specifies a delayed ef The 90th day after the record | | t an effective tir | ne, at 12:01 a.m | . on the earlie | er o |
| | 2018 | /// | Q. | | |
| August 14 ated | | CAR | | | |
| | nature of a member or autho | orized representative o | f a member | | |

Page 3 of 3

Filing Fee: \$25.00