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Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

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: (954)208-0845 Fax Number

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TAURUS BELTWAY NORTH I GP LLC

Certificate of Status	0
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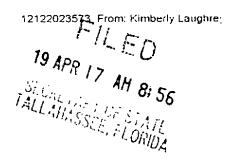
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# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION



Taurus Beltway North I GP LLC		· 
(Name of the Limited Liability (A Florida	ty Company as It now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C Florida document number 1.19000066962	ompany were filed on March 8, 2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited Hability company here:	
Beltway North I GP LLC		
The new name must be distinguishable and contain the words "Lim	ited 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 ADDR	RESS)	
Enter new mailing address, if applicable:		
(Malling address MAY RE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add		nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street oddress	
	, Florid	
	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.

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 = A	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			Change
<del></del>			□ Add
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E. Effective date, if other than the date of filing:  (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)(h. 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 dologed effective date, but not an effective time, at 12:01 a.m. on the earlier of:	·	ne record is file	ed. 2019			
E. Effective date, if other than the date of filing:  ((If an effective date is listed, the date must be specific and cumust be prior to date of filing or more than 90 days after filing.) Pursuant to 805.0207 (3)0th Notes: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the	d specifies a d	elayed effectiv	re date, but no	t an effective tii	ne, at 12:01 a.n	n, on the earlier of:
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