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## Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.Incserv.com

e-mail: accounting@incserv.com

## **ORDER FORM**

**TO** Florida Department of State

Division of Corporations, Clifton

Building

2661 Executive Center Circle

Tallahassee, FL 32301

corphelp@dos.myflorida.com

850-245-6051

**FROM** 

Melissa Stops

mstops@incserv.com

850.656.7953

**REQUEST DATE** 5/7/2019

**PRIORITY** Routine

**OUR REF # (Order ID#)** 741192

**ORDER ENTITY** 

FEDERATION TOWERS LAND LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

File the attached amendment

2019 HAY - 7 AM 8: 5

NOTES:

\$25.00 Authorized

**RETURN/FORWARDING INSTRUCTIONS:** 

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Tuesday, May 07, 2019 Page 1 of 1

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Fed	eration Towers Land LLC	
	(Name of the Limited Lis (A Fig.	ibility Company as it now appears on our records.) orda Limited Liability Company)	
The Articles of Organi Florida document nun		y Company were filed on March 22, 2019	and assigned
This amendment is su	omitted to amend the following	Ç.	
A. If amending nam	e, enter the new name of the	imited liability company here:	
The agest ages and the dist		Limited Liability Company," the designation "LLC" or th	- A
The new name must be us	inguishable and condin the words	cimited Diability Company, the designation ELC or th	<u> </u>
Enter new principal	offices address, if applicable:	<del></del>	
(Principal office addr	ess MUST BE A STREET AD	DRESS)	
ا Enter new mailing ad	dress, if applicable:		္ ႏုိ တ
 (Mailing address MA)	Y BE A POST OFFICE BOX)		57
	····		
registered agent and/ Name of Nev	or the new registered office a	gistered office address on our records, <u>ent</u> ddress here:	er the name of the new
New Register	ed Office Address:	Enter Florida street address	
		, Florida, Florida	Zip Code
  New Registered Agent'	s Signature, if changing Registe	ered Agent:	•
hereby accept the approvisions of all statu accept the obligations being filed to merely	opointment as registered age tes relative to the proper and t of my position as registerea	nt and agree to act in this capacity. I further to I complete performance of my duties, and I at I agent as provided for in Chapter 605, F.S. C wered office address, I hereby confirm that the	n familiar with and Or, if this document is
		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 = 1 AMBR =	Manager   Authorized Member				
<u>Title</u>	Name	<u>Address</u>	Type of Action		
MGR	Stuart Feldman	250 West 55th Street, 35th Fl., NY NY 10019	■ Add		
			Remove		
MGR	Jeffrey C. Goldberg	250 West 55th Street, 35th Fl., NY	Change		
———		NY 10019	■ Add		
			□ Remove		
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D. If am	ending any	other information, enter change(s) here: (Attach additional sheets, if necessary.)		
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(If an effe Note:	ective date is lis If the date ins	ther than the date of filing:	05.0207 sted as	(3)(b) the
If the rec (b) The	ord specifi 90th day a	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earl fter the record is filed.	ier of	:
		_		
Dated_		$\frac{3}{2019}$		
	Jeffrey C	Signature of a member or authorized representative of a member  Goldberg		
		Typed or printed name of signee		
		Page 3 of 3		

Filing Fee: \$25.00