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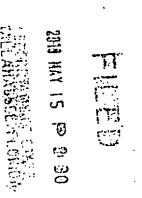
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MAY 3 - COTS

COVER LETTER

то:	Registration Sec Division of Corp		
err e ri		nor at Spring Creek, LLC	
SUBJI	:C1:	Name of Limite	ed Liability Company
The en	closed Articles of A	Amendment and fee(s) are submi	nitted for filing.
Please	return all correspor	ndence concerning this matter to	the following:
		Stuart A. Heaton	
		Elevation Financial Group, L	Name of Person LLC
			Firm/Company
		201 E. Pine Street, Suite 200	
		Orlando, FL 32801	Address
		sheaton@elevationfinancialgr	City/State and Zip Code roup.com
For fu	rther information co	E-mail address: (to oncerning this matter, please call	be used for future annual report notification)
	A. Heaton	•	407 215 1350
	Name of	Person	Area Code Daytime Telephone Number
Enclos	sed is a check for th	e following amount:	
■ \$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Serenity Manor at Spring Creek, LLC

(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on or cimited Liability Company)	ir records.)
The Articles of Organization for this Limited Liability Co.	mpany were filed on April 30,	, 2019 and assigned
Florida document number L19000117505		2013 HAY 15 PD 20 30
This amendment is submitted to amend the following:		MELAHASSEE FOREN
A. If amending name, enter the new name of the limite	ed liability company here:	
		•
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRE	<u></u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
muning duaress may be a rost of thee boxy		
	-	
B. If amending the registered agent and/or registe	ered office address on our	records, enter the name of the new
registered agent and/or the new registered office addre		<u> </u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida str	pot uddross
	2/10/10/10/10	
		, Florida Zip Code
	City	гр Спае
New Registered Agent's Signature, if changing Registered	Agent:	
I hereby accept the appointment as registered agent as provisions of all statutes relative to the proper and confacept the obligations of my position as registered agenting filed to merely reflect a change in the registered company has been notified in writing of this change.	mplete performance of my d ent as provided for in Chapt	uties, and I am familiar with and er 605, F.S. Or, if this document is
	If Changing Registered Agent. S	ignature of New Registered Agent

If amending Authorized Person(s) authorized to manage, or removed from our records:		nanage, enter the title, name, an	d address of each person being adde
MGR = N			
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Elevation Real Property Fund VII, LLC		
			■ Remove
			Change
MGR	Elevation Real Property Fund VI, LLC		
			□ Remove
			Change
			□ Remove
		1	□ Change
			Add
			□ Remove
			Change
			Add
			Remove
			☐ Change
			□ Remove
			Change

If amending any other i	nformațion, enter	change(s) here	r: (Attach ada	litional sheets,	if necessary.)	
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. Effective date, if other	than the date of fil	ing:			_ (optional)	
(If an effective date is listed, the Note: If the date inserted document's effective date	in this block does no	t meet the applic	able statutory f	or more than 90 d Tling requireme	lays after filing.) I ents, this date w	oursuant to 605.0207 (3 ill not be listed as th
the record specifies a) The 90th day after	delayed effective the record is file	e date, but no d.	ot an effectiv	ve time, at 1	2:01 a.m. o	n the earlier of:
Dated May 10		2019				
	E Luc	of all	- Com			
		rest Lat.				
	Signature of	a member or auth	orized representa	itive of a membe	ı	
Stuart A. Heat		a member or auth	orized represent	itive of a membe	I	

Page 3 of 3

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