Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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 TIMBERRIDGE OPERATIONS LLC

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Estimated Charge	\$55.00

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AUG 0 8 2019

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TimberRidge Operations LLC	
(Name of the Limited Liability Company as it now appears (A Florida Limited Liability Company)	(un our records)
The Articles of Organization for this Limited Liability Company were filed on Ma	y 24, 2019 and assigned
Florida document number L19000136566	
This amendment is submitted to amend the following:	56 6
A. If amending name, enter the new name of the limited liability company he	REI 18 T.
The new name must be distinguishable and contain the words "Limited Liability Company," the de-	arguation "LLC" or the abbreviation "LELC."
Enter new principal offices address, if applicable:	S S S
(Principal office address MUST BE A STREET ADDRESS)	<u>.</u>
	- Dir. 19
B. If amending the registered agent and/or registered office address on registered agent and/or the new registered office address here:	our records, enter the name of the ne
Name of New Registered Agent:	
New Registered Office Address: Enter Flori	da street address
	Florida
City	, Florida
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree to act in this c provisions of all statutes relative to the proper and complete performance of t accept the obligations of my position as registered agent as provided for in C	my duties, and I am familiar with and 🧪

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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 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>	Address	Type of Action
AMBR	TimberRidge Operations Holdings	174 Governors Road	Add
		Lakewood, New Jersey 08701	☐ Remove
			Change
MGR	Solomon Klein	267 Broadway	□ Add
		Brooklyn, New York 11211	□ Remove
			☐ Change
			Add Day
			Remove
		9 Add	
		☐ Remove	
			□ Add
		☐ Remove	
			_ Change
			□ Add
			□ Remove
			☐ Change

	
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effective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing e: If the date inserted in this block does not meet the applicable statutory ament's effective date on the Department of State's records. record specifies a delayed effective date, but not an effective 90th day after the record is filed.	tinng requirements, and date with notice and
ed August 6. 2019	
Signature of a member of authorized represent	fative of a member
•	
Alexander Koenig, Authorized Representative	

Filing Fee: \$25.00