## 119000153996

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Document Number)
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K. SALY JUL 18 ZU19 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I20000001	95
REFERENCE : 849750	8113042
AUTHORIZATION :	
COST LIMIT : \$ 25.00	man
ORDER DATE : July 17, 2019	
ORDER TIME : 3:34 PM	
ORDER NO. : 849750-005	
CUSTOMER NO: 8113042	
DOMESTIC AMENDMENT FILING	
NAME: BTV I INVESTOR LLC	
EFFECTIVE DATE:	
XX ARTICLES OF AMENDMENT	
RESTATED ARTICLES OF INCORPORATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING	G:
CERTIFIED COPY	
XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Roxanne Turner EXT# 62969	

EXAMINER'S INITIALS:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



BTV I INVESTOR 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 Liabilit	y Company were filed on June 19, 2019	and assigned
Florida document number Li 9000153996		
This amendment is submitted to amend the following	ż:	
A. If amending name, enter the new name of the l	limited liability company here:	
FOX HOLLOW FW LLC		
The new name must be distinguishable and contain the words "	Limited Liability Company," the designation "LLC" of	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:  (Muiling address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or re registered agent and/or the new registered office a	•	enter the name of the n
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	<del>-</del>
	, Floric	da
	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

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
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E. Effective date, if other th (If an effective date is listed, the office is the date inserted in document's effective date or	late must be specific this block does n	e and cannot be prior tot meet the appli	cable statutory fi.	r more than 90 days a	ptional) fter filing.) Pursuant to 605.020 this date will not be listed a
f the record specifies a debt b) The 90th day after th			ot an effective	e time, at 12:0	1 a.m. on the earlier o
Dated July	<del></del>	2019	· ·		
· · · · · · · · · · · · · · · · · · ·					
		72			
	Signature	of a member or auth	norized representati	ve of a member	

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Filing Fee: \$25.00