8/21/2019

Division of Corporations



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Division of Corporations

Fax Number : (850)617-6383

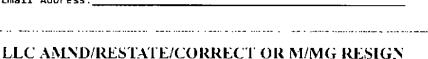
From:

Account Name : C T CORPORATION SYSTEM

Account Number : FC4000000023 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:	





RETAIL AT GLASS HOUSE, LLC

Electronic Filing Menu — Corporate Filing Menu

Help

T GLASS

AUG 22 2019

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RETAIL AT GLASS HOUSE, EL	-			
(Name of the Limi	ted Liability Compe (A Florida Limited)	ins as it now appears on our Liability Company)	tecatyr)	
The Articles of Organization for this Limited L	iability Company	were filed on JULY 19.3	2019	and assigned
Florida document number 1.19000185872	·			
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	f the limited liab	ility company here:		
N/A				
The new name must be distinguishable and contain the	vords "Limited Liabi	lity Company," the designation	n"L1 C" of the abbrevi	ation "L.L.C."
Enter new principal offices address, if applicable:		N/A		
(Principal office address MUST BE A STREE	ET ADDRESS)			2019
			- 	<u></u>
			: *	- S - F - F:
Enter new mailing address, if applicable:		N/A		<u> 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 </u>
(Mailing address MAY BE A POST OFFICE	BOX)	·		<u> </u>
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B. If amending the registered agent and	or registered o	ffice address on our re	ecords, enter the	name of the new
registered agent and/or the new registered o	ffice address ber	<u>e</u> :		
Name of New Registered Agent:	N/A			
New Registered Office Address:				
		Enter Florida street	culdress	
			Florida	
		Ciņ	Z	ір Сікве

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 abligations 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

Title	Name	<u>Address</u>	Type of Action
MGR	UNICORP INVESTORS V, LLC	7940 VIA DELL'AGIO WAY	D Add
		SUITE 200	
			■ Remove
		ORLANDO, FL 32819	Change
MGR	UNICORP INVESTORS II. LLC	7940 VIA DELLAGIO WAY	
		SUITE 200	
			□ Remove
		ORLANDO, FL 32819	Change
			
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