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OCT 09 2020

COVER LETTER

TO: Registration Section

rporations		
s Manager LLC		
Name of Lim	ited Liability Company	
Amendment and fee(s) are sub	mitted for filing.	
ondence concerning this matter	to the following:	
Jeffrey C Steinert		
	Name of Person	· · · · ·
Jameson Pepple Cantu PL	LC	
	Firm/Company	
801 2nd Avenue, Suite 700	0	
	Address	
Seattle, WA 98104		
ISTEINERT@IPCLAW C	City/State and Zip Code	
		ification)
concerning this matter, please c	aff:	
	206 625-9984	
of Person	Area Code Daytin	ne Telephone Number
he following amount:		
☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>Street Address:</u> Registration Se	ection
Corporations	Division of Cor	rporations
		Fallahassee be Street, Suite 810
	S Manager LLC Name of Lim Amendment and fee(s) are sub- ondence concerning this matter Jeffrey C Steinert Jameson Pepple Cantu PL 801 2nd Avenue, Suite 700 Seattle, WA 98104 JSTEINERT@JPCLAW.Co E-mail address: (concerning this matter, please concerning this matter, please concerning this matter, please concerning this matter.)	Name of Limited Liability Company **Amendment and fee(s) are submitted for filing. **Dondence concerning this matter to the following:** Jeffrey C Steinert

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2221A17-26 PH 6: 22

SP Heights Manager 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 Liability Company v	vere filed on August 12, 2019	and assigned
Florida document number L19000205145		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" o	r the abbreviation "L L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office adapted and/or the new registered office address here: Name of New Registered Agent:	Idress on our records, <u>enter th</u>	e name of the new registered
		_
New Registered Office Address:	Enter Florida street address	
	, Flori , Flori	da Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of my duties, and covided for in Chapter 605, F.S.	Lam familiar with and S. 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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address 2021 AC 3 26 PH 6: 22	Type of Action
MGR	SP and MS LLC	5403 West Gray Street	🗀 Add
		Tampa, FL 33609	■Remove
			□Change
MGR SP and 40 LLC	SP and 40 LLC	5403 West Gray Street	≣∧dd
		Tampa, FL 33609	□Remove
			□Change
MGR	J. David Page	5403 West Gray Street	□AdJ
		Tampa, FL 33609	≣Remove
			□Change
VP	J. David Page	5403 West Gray Street	≣ Add
		Tampa, FL 33609	□Remove
			□Change
			□Add
			□Remove
		□ Change	
<u></u>			□Add
			□Remove
			□ Change

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	VII.
	
fective date, if other than the date of filin	g: (optional)
n effective date is listed, the date must be specific and	d cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02
ote: If the date inserted in this block does not recument's effective date on the Department of S	meet the applicable statutory filing requirements, this date will not be listed a
ounchi s circonvo date on the Department of C	otate 3 feed es.
	t an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is filed.	
August 33	2020
ated August 22	,
10010	
Signature of a	member or authorized representative of a member

Filing Fee: \$25.00