

L20000058711

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

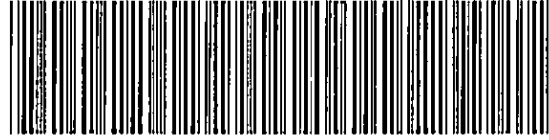
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED

2020 MAR 11 AM 10:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2020 MAR 11 AM 10:53

Y SULKER  
MAR 12 2020

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 226811 4307326

AUTHORIZATION :

COST LIMIT

*[Handwritten signature]*  
\$5500

ORDER DATE : March 10, 2020

ORDER TIME : 9:47 AM

ORDER NO. : 226811-005

CUSTOMER NO: 4307326

DOMESTIC AMENDMENT FILING

NAME: 385 14TH AVENUE LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT  
       RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

~~XX~~ CERTIFIED COPY  
       PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT#

EXAMINER'S INITIALS: \_\_\_\_\_

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 385 14th Avenue LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Monique D. Dewdney  
Name of Person

Arnold & Porter  
Firm/Company

601 Massachusetts Avenue NW  
Address

Washington, DC 20001  
City/State and Zip Code

monique.dewdney@arnoldporter.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matthew Kirsch at (202) 942-6587  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee     \$30.00 Filing Fee & Certificate of Status     \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)     \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32302

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

385 14th Avenue 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 were filed on February 25, 2020 and assigned Florida document number L20000058711.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or 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 address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

*Enter Florida street address*

\_\_\_\_\_, Florida

City

FILED  
020 MAR 1 AM 10:35  
SECRETARY OF STATE  
ALLIANCE SECRETARIAT FLORIDA  
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>	<u>Address</u>	<u>Type of Action</u>
AMBR, MGR	Camalier 2015 Family Exempt Trust, Charles A. Camalier, III, as Trustee	6500 Rock Spring Drive, Ste. 5	<input type="checkbox"/> Add
		Bethesda, MD 20817	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR, MGR	2015 Charles A. Camalier, Jr. Family Trust u/a dated November 1, 2016, Charles A. Camalier, III, as Trustee	6500 Rock Spring Drive, Ste. 5	<input type="checkbox"/> Add
		Bethesda, MD 20817	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Camalier Management LLC	6500 Rock Spring Drive, Ste. 5	<input checked="" type="checkbox"/> Add
		Bethesda, MD 20817	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

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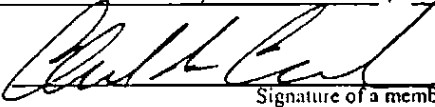
**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated March 9 2020

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Charles A. Camalier, III  
\_\_\_\_\_  
Typed or printed name of signee