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From:

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Account Number : 075500004387

Phone

: (813)229-7600

Fax Number

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Fmsil	Addi	-000	

arichards@shumaker.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WRH RIVERSIDE, LLC

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Help

If Changing Registered Agent, Signature of New Registered Agent

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WRH Riverside, LLC		
(Name of the Limited Liability Company) (A Florida Linuted Liab	as it now appears on our records.) ility Company)	
The Articles of Organization for this Limited Liability Company we Florida document number <u>L20000081672</u>	re filed on <u>03/19/2</u> 020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	y company here:	20211 20211
WRH Longleaf, LLC		
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" o	
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
-	<u> </u>	- 17 · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office adeagent and/or the new registered office address here: Name of New Registered Agent:	dress on our records, <u>enter th</u>	e name of the new registered
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
,	. Flor	ida
	City	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 per accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office accompany has been notified in writing of this change.	erformance of my duties, and ovided for in Chapter 605, F.	S. Or, if this document is

____ Change

H21000180939 3
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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			□Add
		·	□Remove
		,	£n Endd
			S ZDAdd
			GC DChange
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		·	□Add
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			. DChange
			Петоче

H21	000	18	093	93

	ntion, enter change(s) here: (Attach addition	
		<u> </u>
		
<u> </u>		
		# 5 5 F
		<u> </u>
		FA 50
		
E. Effective date, if other than t (If an effective date is listed, the date is Note: If the date inserted in this document's effective date on the	out be specific and curnot be prior to date of filing or mo block does not meet the applicable statutory filing	(optional) re than 90 days after filing.) Pursuant to 605,0207 requirements, this date will not be listed as
If the record specifies a delayed effectecord is filed.	tive date, but not an effective time, at 12:01 a.m. o	n the earlier of: (b) The 90th day after the
		of a member

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