Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.

Account Number : I19990000000 Phone : (407)425-7010

Fax Number : (407)425-2747

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

Email Address: corporate@zkslaw.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 1900 SOUTH LAKE REEDY BOULEVARD (FL), LLC

Certificate of Status	0
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Page Count	05
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Help

K. SALY

DEC 19 2024

TO: Registration Se Division of Cor			
	TH LAKE REEDY BOULEVA	ARD, LLC	
SUBJECT:	Name of Lim	nted Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following.	
	D. Scott Baker		
		Name of Person	
	Zimmerman Kiser Sutclift	e. P.A.	
		Firm/Company	
	315 E. Robinson Street, St	ite 600	
	<del></del>	Address	<del></del>
	Orlando, F1, 32801		
	. 6.1.1	City/State and Zip Code	<del>-</del> ·
	corporate@zkslawtirm.con E-mail address (	to be used for future annual repor	t notification)
For further information c	oncerning this matter, please c	all.	
Eileen Soto, Legal Assis	tant	407 425-70	10
Name o	f Person	Area Code D	aytime Telephone Number
Enclosed is a check for th	ne following amount		
■ \$25 00 Filing Fee	□ \$30 00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed	S60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration 5		Street Addre Registration	
Division of Corporations			*Corporations

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Docusign Envelope ID: 54F60297-A65C-42C1-B2ED-7DD29E08A61C

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



1900 SOUTH LAKE REEDY BOULEVARD, 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 Liab		and assigned
Florida document number <u>1.21000180313</u>	·	
This amendment is submitted to amend the follow	inā:	
A. If amending name, enter the new name of the	ne limited liability company here:	
The new name must be distinguishable and contain the word	Is "Limited Liability Company." the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le: N/A	
(Principal office address MUST BE A STREET)	- <del></del>	
Enter new mailing address, if applicable:	S/A	
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or reg agent and/or the new registered office address l		s, enter the name of the new registered
Name of New Registered Agent:	N/A	
New Registered Office Address:	Enter Florida stre	et address
		, Florida
	Ciņ	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.

Docusign Envelope 10: 54550297-A55C-42C1-82ED-7DD29E08A81C in amending Authorized rerson(s) authorized to manage, enter the fitle, name, and address of each person-being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	GMF GROUP FL PORTFOLIO I, LLC	315 E. ROBINSON ST STE 600	🗆 Add
		ORLANDO, FL 32801	Remove
			□ Change
MGR	GMF GROUP FL FORT FOLIO V, LLC	315 E. ROBINSON ST STE 600	≅Add
		ORLANDO, FL 32801	
			= Change
			(C)Add
			Egemove
			ASSEE, FLORIDO
		<del>.</del>	□Change
			□Add
			□Add
			□Remove
			□ Change

Effective date, if other than the date of filing:  UPON FILING (optional)  (If an effective date is field the date must be specific and commit be prive to date of filing or more than 90 days after filing 3 Pursuant to 60% 0.207 (36).  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.  The record specifies a delayed effective date, but not an effective time, at 12 0 if a million the earlier of (h). The 90th day after the not as filed.  Dated October 2024  Effective date, if other than the date of filing:  Signature of a member of authorized representative of a member.			. =
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CARREL (CANTRE)	Dated October	2024	
Signature of a member or authorized representative of a member		el)	
		Signature of a member or authorized representative of a	member

Filing Fee: \$25.00