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Special Instructions to	Filing Officer:	
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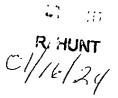




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## CT CORP

## (850) 656- 4724 3458 lakesore Drive Tallahassee, FL 32312

Acc#I20160000072

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Name:	GPC MERIDIAN JACKSONVILLE INVESTOR 1 LLC
Document #:	
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Thank you!

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

		VILLE INVESTOR 1 LLC			
(Name of the Limi	ted Liability Compa (A Florida Limited l	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited L	iability Company	were filed on December 20, 2023	<del></del>	_ and a	ssigned
Florida document number L23000557562	,				
This amendment is submitted to amend the foll	owing:				
A. If amending name, enter the new name o	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 "LLC" o	r the abbre	viation '	L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		2980 NE 207thStreet, Suite 706		#1. * 1 **	
		Aventura, Florida 33180			
Trincipal vijice unuress Proof 1927 (Original)				:-	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2980 NE 207thStreet, Suite 706	15.00 15.00	5 PH	1 4
		Aventura, Florida 33180	7.00	က်၊	<b></b> /
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J. If amending the registered agent and/or gent and/or the new registered office address Name of New Registered Agent:		address on our records, <u>enter th</u>	e name o	of the r	iew <u>regist</u>
<del></del>	N/A				
New Registered Office Address:		Enter Florida street address			
		19	د.		
		Flori	na	Zip Coo	le
New Registered Agent's Signature, if changing	Registered Agents	•		-	

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>	Address	Type of Action
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		Aventura, Florida 33180	■Remove
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effective date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be prior to dat  e: If the date inserted in this block does not meet the applicable:	e of filing or more than 90 days after	<b>nal)</b> filing.) Pui date will	suant to	605.020 listed a
ument's effective date on the Department of State's records.	authory many requirements and			
cord specifies a delayed effective date, but not an effective time, a s filed.	it 12:01 a.m. on the earlier of: (b)	The 90	)th day a	ifter the
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Filing Fee: \$25.00