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Docusion Envelope ID: 16BE185D-AB41-45FE-B690-05FE85C60985 **CUVER LETTER** (((H24000237400 3))) TO: Registration Section Division of Corporations Brookstone Auburndale, LLC SUBJECT: 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: John P. Grygiel, Esq. Name of Person Zimmerman, Kiser & Sutcliffe, P.A. Firm/Company 315 E. Robinson Street, Suite 600 Address Orlando, Florida 32801 City/State and Zip Code corporate@zkslaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Emily Bautista, paralegal Name of Person Daytime Telephone Number Enclosed is a check for the following amount: ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fcc, **■ \$25.00** Filing Fee Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: Mailing Address: Registration Section Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

(((H24000237400 3)))

Docusign Envelope ID: 16BE185D-AB41-45FE-B690-05FE85C60985 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Brookstone Auburndale, LLC		
(Name of the Limited Liability Com (A Florida Limited	nany as it now appears on our in Liability Company)	records.)
The Articles of Organization for this Limited Liability Company were filed of Florida document number L24000275003		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility 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:		<u></u>
Mailing address MAY BE A POST OFFICE BOX)		
		i n
B. If amending the registered agent and/or registered office	e address on our records,	enter the name of the new register;
agent and/or the new registered office address here:		
N		မ္ 🔾
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	Enter Florida street	eddans.
	Die Tonia Si eti	
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agen	t;	
I hereby accept the appointment as registered agent and agorovisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	te performance of my duti s provided for in Chapter	es, and I am familiar with and 605, F.S. Or, if this document is
7.00	anging Pegistered Agent Sign	store of New Peristand & cont

Docusign Envelops ID: 168E185D-AB41-45FE-B690-05FE85C60985
II amenuing Authorized rerson(s) authorized to manage, enter the fitte, 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
MGR	Cornerstone Augustine Manager, LLC	2100 HOLLYWOOD BLVD	≅ Add
		HOLLYWOOD, FL 33020	□Remove
			☐ Change
MGR	LOPEZ, JORGE	2100 HOLLYWOOD BLVD	
		HOLLYWOOD, FL 33020	=Remove
			Change
MGR	WOLFE, LEON J	2100 HOLLYWOOD BLVD	□Add
		HOLLYWOOD, FL 33020	■Remove
			□Change
MGR	MADES, MARA	2100 HOLLYWOOD BLVD	□Add
		HOLLYWOOD, FL 33020	■Remove
			Change
			□Add
		<u></u>	□Remove
			Change
			□ Add
			□Remove
			Change

				
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	date of filing: Upon Filing		(optional)	
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