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(Rec	questor's Name)	
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COVER LETTER

TO:	Registration Sec Division of Corp				
SUBJ	ECT:	LRA Reunio Name of Foreign	n Golf Course Limited Liability		
Dear S	Sir or Madam:				
The en	closed application	n, certificate and fee(s) ar	re submitted for fi	iling.	
Please	return all corresp	ondence concerning this	matter to the follo	owing:	•
		mmy Hotaling	<u> </u>		
	1	Name of Person			
		_egal Department			
	F	Firm/Company			
	1 Hammock E	Beach Parkway, 2nd F Address	Floor		
		oast, Florida 32137 City/State and Zip Code			
E-m		ng@hammockbeach. used for future annual re)	
For fu	rther information (concerning this matter, p	lease call:		
	Tammy H		at (386)		246-5859
	Name of	Person	Area Code & D	Daytime	e Telephone Number
	STREET/COUR Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, Flor	orations Center Circle	R D P	Registra Division P.O. Box	NG ADDRESS: tion Section of Corporations x 6327 see, Florida 32314
		the following amount:]\$30 Filing Fee & Certificate of Status	\$55 Filing Fee Certified Copy		S60 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSPECTA

SECTION I (1-3 must be completed)

f
1. Name of limited liability company as it appears on the records of the Florida Department of State: Ginn Reunion Golf Course, LLC
2. Jurisdiction of its organization: GA
3. Date authorized to do business in Florida: 2/3/2006
SECTION II (4-7 complete only the applicable changes)
4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? 11/22/2010
5. New name of the limited liability company: LRA Reunion Golf Course, LLC (must end with "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.")
6. If the amendment changes the period of duration, indicate new period of duration: NA
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: NA
8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: NA
 Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.
Manager:
By: Amy Wilde, Vice President

Control No. 0605823

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF

EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

LRA REUNION GOLF COURSE, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 01/27/2006 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 21st day of April, 2011

B: P.h-

Brian P. Kemp Secretary of State

Certification Number: 7375987-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp



Brian P. Kemp Secretary Of State Office Of The Secretary Of State Corporations Division

Articles Of Amendment

To Articles of Organization

2818-NOV 13

Article One

The Name Of The Limited Liability Company Is:

Ginn Reunion Golf Course, LLC

Article Two

The Date The Articles Of Organization Were Filed Was:

January 27, 2006

SECRETARY OF ST

Article Three

The Limited Liability Company Hereby Adopts The Following Amendment To Charage The Name Of The Organization. The New Name Of The Organization Is:

LRA Reunion Golf Course, LLC

IN WITNESS WHEREOF, the undersigned has executed these Articles Of Amendment Legacy Resort Assets, LLC, Manager

On November 11, 2010

(Date)

(Signature And Capacity in which signing)

Amy Wilde, Vice President

Form CD 110

State of Georgia Name Change 1 Page(s)



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