

M17000008063

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

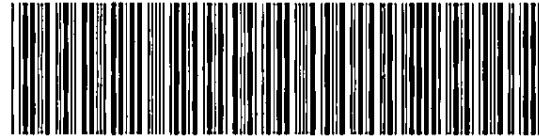
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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2022 JAN 31 AM 10:18

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CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

Date: 01/31/2022

Acc#120160000072

W: C DW

Name:	Lincoln Pointe LLC
Document #:	
Order #:	14126000

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

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	COGS: <input type="checkbox"/>

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ **55.00**

Thank you!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lincoln Pointe LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rebecca Saferstein, Senior Paralegal
Name of Person

Amall Golden Gregory LLP
Firm/Company

171 17th Street, NW, Suite 2100
Address

Atlanta, GA 30363
City/State and Zip Code

david.perez@carrollorg.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rebecca Saferstein at (404) 870-5604
Name of Person Area Code & Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

- \$25 Filing Fee \$30 Filing Fee & Certificate of Status \$55 Filing Fee & Certified Copy \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: Lincoln Pointe LLC

Enter new principal office address, if applicable: 3340 Peachtree Rd NE, Suite 2250

(Principal office address
MUST BE A STREET ADDRESS) Atlanta, GA 30326

Enter new mailing address, if applicable: same as above
(Mailing address
MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M17000008063

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 09/21/2017

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(must contain "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 contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

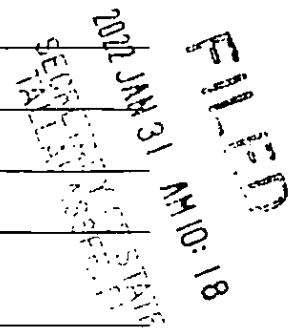
Enter Florida Street Address

_____, Florida _____
City 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.

If Changing Registered Agent, Signature of New Registered Agent



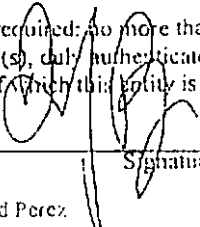
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

<u>Title/Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MBR	Lincoln Point Sole Member, LLC	3340 Peachtree Road NE, Ste 2250	<input checked="" type="checkbox"/> Add
		Atlanta, GA 30326	<input type="checkbox"/> Remove
MBR	Lincoln Pointe Venture LLC	850 Cassatt Road, Ste. 300	<input type="checkbox"/> Add
		Berwyn, PA 19312	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add

9. Attached is a certificate, if required: 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

Remove
 N/A per 605.0907(4): no
 amendment required in
 jurisdiction of formation



 Signature of the authorized representative

David Perez

 Typed or printed name of signee

Filing Fee: \$25.00