

**MA 000012246**

# Florida Department of State

## Division of Corporations Electronic Filing Cover Sheet

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.

((H24000206650 3)))



H240002066503ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.  
Doing so will generate another cover sheet.

To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : COMPUTERSHARE  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)214-8442

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

Email Address: \_\_\_\_\_

24 JUN 13 PM 11:37  
STATE OF FLORIDA  
DIVISION OF CORPORATIONS

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN QCRE X, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

RECEIVED

06/13/24 11:13 PM 12:08

STATE OF FLORIDA  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

# 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: QCRE X, LLC

Enter new principal office address, if applicable: 6111 Broken Sound Parkway NW, Suite 200  
Boca Raton, Florida 33487  
*(Principal office address MUST BE A STREET ADDRESS)*

Enter new mailing address, if applicable: 6111 Broken Sound Parkway NW, Suite 200  
Boca Raton, Florida 33487  
*(Mailing address MAY BE A POST OFFICE BOX)*

2. The Florida document number of this limited liability company is: M19000012246

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 12/27/2019

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

5. New name of the limited liability company: 162 NE 2nd Ave., LLC  
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

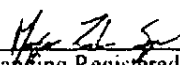
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C.," or "LLC.")

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: ASSOCIATED CORPORATE SERVICES, LLC

New Registered Office Address: 6111 Broken Sound Parkway NW, Suite 200  
*Enter Florida Street Address*  
Boca Raton, Florida 33487  
*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.*

 by: Marja Souza, Attorney-in-fact  
If Changing Registered Agent, Signature of New Registered Agent

27 JUN 19 PM 1:27  
FILED  
CLERK OF THE COURT  
STATE OF FLORIDA

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>
Authorized Representative	Daniel Kaskel	6111 Broken Sound Parkway NW, Suite 200	<input checked="" type="checkbox"/> Add
		Boca Raton, Florida 33487	<input type="checkbox"/> Remove
MGR, MBR	QUOGUE OPERATIONS MANAGEMENT, LLC	101 CENTRAL PARK WEST, STE. 1F	<input type="checkbox"/> Add
		NEW YORK, NY 10023	<input checked="" type="checkbox"/> Remove
AP	SEITLES, VICTOR M	101 CENTRAL PARK WEST, STE. 1F	<input type="checkbox"/> Add
		NEW YORK, NY 10023	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

26 JUN 13 11:37

STATE  
ATTORNS

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.

Marja Souza  
Signature of the authorized representative

Marja Souza, Attorney-in-fact on behalf of Daniel Kaskel

Typed or printed name of signee

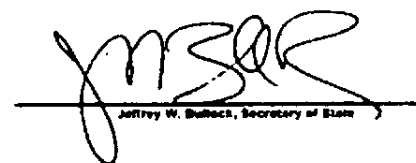
Filing Fee: \$25.00

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "QCRE X, LLC", CHANGING ITS NAME FROM "QCRE X, LLC" TO "162 NE 2ND AVE., LLC", FILED IN THIS OFFICE ON THE TWENTY-SEVENTH DAY OF DECEMBER, A.D. 2021, AT 10:34 O'CLOCK A.M.



Jeffrey W. Bullock, Secretary of State

7770587 8100  
SR# 20242636237

Authentication: 203592605  
Date: 05-30-24

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

State of Delaware  
Secretary of State  
Division of Corporations  
Delivered 10:34 AM 12/27/2021  
FILED 10:34 AM 12/27/2021  
SR 20214216924 - File Number 7770587

**CERTIFICATE OF AMENDMENT  
OF  
CERTIFICATE OF FORMATION  
OF  
QCRE X, LLC**

1. The name of the limited liability company is QCRE X, LLC (the "Company").
2. The Certificate of Formation of the Company is hereby amended by deleting Article First in its entirety and substituting the following therefor:

"FIRST: The name of the Company is: 162 NE 2<sup>nd</sup> Ave., LLC."

**IN WITNESS WHEREOF**, the undersigned has executed this Certificate of Amendment of Certificate of Formation this 24<sup>th</sup> day of December, 2021.

By:   
Name: VICTOR M. SEITLES