8/7/23, 9:35 PM

Division of Corporations

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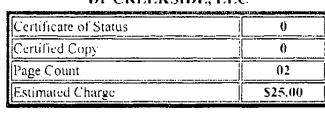
From:

Account Name : VCORP SERVICES, LLC

Account Number : I20080000067 Phone : (845)425-0077 Fax Number : (845)818-3588

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DP CREEKSIDE, LLC



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FOR - 9 2023 I LEMIEUX Ci

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)

State: DP CREEKSIDE, LLC	
Enter new principal office address, if applicable	le:
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY HE A POST OFFICE BOX)	
2. The Florida document number of this limited	Hiability company is: M21006016717
3. Jurisdiction of its organization: Delaware	
4. Date authorized to do business in Florida: $\frac{1}{2}$	2/09/2021
SECTION II (5-9 complete only the applicab	
 New name of the limited liability company: (m 	nust contain "Limited Liability Company, " "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adoption of the written consent of the managers or must contain "Limited Liability Company," "L.	
 If amending the registered agent and/or registered agent and/or the new registered office 	rered officer address on our records, enter the name of the new address here:
New Registered Office Address:	Finer Florida Street Address
	Emer Florida Street Address
_	Cuy , Florida , Zip Code
he provisions of all statutes relative to the prope nd accept the obligations of my position as regi	tent and agree to act in this capacity. I further agree to comply with or and complete performance of my duties, and I am familiar with istered agent as provided for in Chapter 605, F.S. Or, if this we in the registered office address, I hereby confirm that the limited

8. If the amendment changes person, title or capacity in accordance with 605,0902 (1)(e), indicate that change:					
Title/Capacity		<u>Address</u>	Type of Action		
MGR	MALAS, AMER	3121 Michelson Dr, Suite 500			
		Irvine, CA 92612	≣Remo		
MGR	IRA Companies LLC	3121 Michelson Dr. Suite 500	∌ ∧dd		
		Invine, CA 92612	ERemov		
			□Add		
			TRemov		
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			DRemov		
the description of the second second			□Add		
aforementione	der the law of which this entity is	ed by the official having custody of records in the	LJReniove		