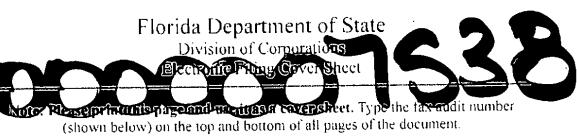
Division of Corporations



(((H200003205513)))



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To:

Division of Corporations

Fax Number : (850)617-6383

Email Address:\_\_

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 : (954)208-0845 Fax Number

\*\*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 HSRE-PWR LAKE GIBSON TRS, LLC

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$55.00

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## 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)

<ol> <li>Name of limited liability Company as it appear</li> </ol>	s on the records of the Florida Department of
State: HSRE-PWR Lake Gibson TRS, LLC	
Enter new principal office address, if applicable:	444 W. Lake St.
( <u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u> )	Suite 2100
	Chicago, 11, 60606
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	444 W. Lake St. SEP
	Suite 2100 22 7
MAT HEAT COTTO	Suite 2100 22 22 Chicago, II. 60606 22 22 23 25 25 25 25 25 25 25 25 25 25 25 25 25
2. The Florida document number of this limited li	
3. Jurisdiction of its organization: Delaware	
4. Date authorized to do business in Florida: 08/2	28/2020
SECTION II (5-9 complete only the applicable	changes)
	st contain "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopte copy of the written consent of the managers or manust contain "Limited Liability Company," "L.L.	d for the purpose of transacting business in Florida and attach a anaging members adopting the alternate name. The alternate name .C." or "LLC.")
6. If amending the registered agent and/or registered agent and/or the new registered office a	red officer address on our records, enter the name of the new address here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida Street Address
	Florida
	City Zip Code
the provisions of all statutes relative to the prope	ent and agree to act in this capacity. I further agree to comply want or and complete performance of my duties, and I am familiar with stered agent as provided for in Chapter 605, F.S. Or, if this we in the registered office address, I hereby confirm that the limited
	Changing Registered Agent. Signature of New Registered Agent

3. If the amendment changes person, title or capacity in accordance with 605.0902(1)(e), indicate that change:  The address of the sole member, HSRE-PWR Lake Gibson, LLC, is changed to the address indicated below.					
itle/Capacity	<u>Name</u>	Address	Type of Action		
stember ———	HSRE-PWR Lake Gibson, LLC	3310 Live Oak Street, Suite 410			
		Dallas, Texas 75204	ERemov		
Member	HSRE-PWR Lake Gibson, LLC	444 W. Lake St., Stc. 2100	■Add		
		Chicago, 11, 60606			
			SEP 22 AH 10: 2		
			AH 10. Person		
			□Add		
			□Remo		
			□Add		
aforementic	under the law of which this entity is o	I by the official having custody of records a regarized. — Information not required in juri	□ Remo in the sdiction of formation.		
	G/a-Sionature	of the authorized representative			
	Stephen M. Gordon				

Filing Fee: \$25.00