M2/000010798

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
tified Copies Certificates of S	status
pecial Instructions to Filing Officer:	

Office Use Only



500373757505

59.727.731 | 00001 - 017 | ******75.60

\ (anic (h)

> SEP 3 1 7021 LALBRITTON

RECEIVED RECEIVED 2021 SEP 22 PH 1: 21

CORPORATE

When you need ACCESS to the world

ACCESS,	_

INC.

. 236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

		WALK IN	
	I	PICK UP: 9/22 DANNY	
	CERTIFIED COPY	Υ	
X	РНОТОСОРУ		
	CUS		
x	FILING	FOREIGN LLC AMEND	
(C	ORPORATE NAME AND D	DOCUMENT #)	
	ORPORATE NAME AND D		, <u>.</u> ,
	ORPORATE NAME AND D		
-(C	ORPORATE NAME AND D	DOCUMENT #)	
(C	ORPORATE NAME AND D	DOCUMENT #)	
IAL RUCT	TIONS:		

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)

Name of limited liability Company as it appears State: TMGOC H2 SARASOTA LLC	•
Enter new principal office address, if applicable:	
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)	1821 STP 22
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PH 12: 58
2. The Florida document number of this limited liab	oility company is: M21000010798
4. Date authorized to do business in Florida: Augu	st 18, 2021
SECTION II (5-9 complete only the applicable c	S
5. New name of the limited liability company: The company of the limited liability company of the liability company of t	IGOC 8260 SARASOTA LLC
TMGOC 8260 SARASOTA LLC	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 aging members adopting the alternate name. The alternate name ." or "LLC.")
6. If amending the registered agent and/or registered registered agent and/or the new registered office ad-	d officer address on our records, enter the name of the new dress here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida Street Address
	, Florida
the provisions of all statutes relative to the proper a and accept the obligations of my position as registe.	ustered Agent: t and agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar with red agent as provided for in Chapter 605, F.S. Or, if this at the registered office address, I hereby confirm that the limited

. If the amendment	changes person, title or capacity in ac	cordance with 605.0902 (1)(e), indicate th	at change:
itle/ Capacity	Name	Address	Type of Action
			🗀 Add
			□Remo
			□Add
			□Remo
			□Add
			□Remo
			□Add
			□Remo
			□Add
aforementioned ar	the law of which this entity is organi.	he official having custody of records in the	DRemo

Filing Fee: \$25.00

Typed or printed name of signee

<u>Delaware</u>

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 "TMGOC H2 SARASOTA LLC", CHANGING ITS NAME FROM "TMGOC H2 SARASOTA LLC" TO "TMGOC 8260 SARASOTA LLC", FILED IN THIS OFFICE ON THE NINETEENTH DAY OF AUGUST, A.D. 2021, AT 5:39 O'CLOCK P.M.



Authentication: 203966669

Date: 08-20-21

State of Delaware Secretary of State Division of Corporations Delivered 05:39 PM 08/19/2021 FILED 05:39 PM 08/19/2021

STATE OF DELAWARE SR 20213030480 - Flle Number 6170153 CERTIFICATE OF AMENDMENT

The Certificate of	of Formation of the limited liability company is hereby ar
Article Fir	st is hereby amended to change the nam 260 SARASOTA LLC
	name of the limited liability company SARASOTA LLC
in witness v	HEREOF, the undersigned have executed this Certifica
	-
	_
	day of AUGUST , A.D. 202
IN WITNESS V	day of AUGUST , A.D. 2021 By: /s/ Ramy Odeh