L19000096556

(Re	equestor's Name)	
(Ad	ldress)	
(Àd	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Ďo	ocument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
]

Office Use Only



800355848228

12/08/20--01015--017 **25.00

2020 DEC -8 PH 12: 2

1/20/21 SA

COVER LETTER

Registration Section

TO:

Division of Co	porations		
	AUTUMN CHASE HOLDING	S THREE LLC	•
SUBJECT:	Name of Limi	ted Liability Company	
The englosed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	Michael Foelster, Esq.		
		Name of Person	
	Backer Aboud Poliakoff &	Foelster, LLP	
		Firm/Company	·
	400 S. Dixie Highway, Sui	te 420	
		Address	
	Boca Raton, FL 33432		
		City/State and Zip Code	
	mfoelster@bapflaw.com	to be used for future annual report noti	(figurion)
			arcaron,
For further information	concerning this matter, please ca	1H:	
Michael Foelster, Esq.		561 361-8535 at ()	
Name	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
P.O. Box 63	Section Corporations 27	Street Address: Registration Sc Division of Co The Centre of	rporations Fallahassee
Tallahassee.	FL 32314	2415 N. Monro	be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EVEREST AUTUMN CHASE HOLDINGS THREE I	LLC	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) .iability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 119000096556	were filed on 4/8/2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	409 Bala Circle	
Principal office address MUST BE A STREET ADDRESS)	Bala Cynwyd, PA 19004	
Principal office dauress MOST BE A STREET ADDRESSY		202
Enter new mailing address, if applicable:	409 Bala Circle	FILE
(Mailing address MAY BE A POST OFFICE BOX)	Bala Cynwyd, PA 19004	
		-
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter th</u>	e name of the new registe
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Flori	ida
	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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	ZNY HOLDINGS, LLC	19 Bala Ave, Suite 201A	
		Bala Cynwyd, PA 19004	≡ Remove
			☐ Change
MGR	Everest Series IV Autumn Chase LP	utumn Chase LP 409 Bala Circle	= Add
		Bala Cynwyd, PA 19004	Remove
			□Change
			2000 DEC DROPE TO SECURITION OF THE PERSON O
			Pl Change
			□Add
			□Remove
			□Change
			□Remove
			Change
			□Add
			□ Remove
			□ Change

					- <u></u>		
							-
							-
							_
	 -						-
							-
							-
							-
							_
						2_	_
				<u> </u>		020 DEC	
							
							ш 亡
						PH 12:	Ü
						<u></u>	_
							_
fective date, if other than (n effective date is listed, the date	he date of fil	ling:			_ (optional)	D	35 020
ote: If the date inserted in this	s block does no	at meet the app	neable statutor	g or more than 90 y filing requirem	ents, this date v	vill not be lis	sted a
cument's effective date on the	: Department o	of State's record	ds.				
ecord specifies a delayed effe	ctive date, but	not an effective	time, at 12:01	a.m. on the earl	ier of: (b) The	90th day afi	ier the
is filed.	Mic dure, our						
Novamber 30		2020					
November 30		- //-	<u> </u>				
		M-	W _	ntative of a memb			