L22000011149

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer						

Office Use Only



500413247945

98/22/23--01002--022 **50.00

TÄLLAHASSEE, FLORIDAÄLLAHASSEE

FILED RECEIVED 2023 AUG 22 PM 2: 56

CORPORATE ACCESS, _

When you need ACCESS to the world

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

	CERTIFIED COPY	
XX	РНОТОСОРУ	
	CUS	
XX	FILING	AMEND TO STATEMENT OF AUTHORITY
	JEN FLORIDA 46 LLO	
_	(CORPORATE NAME AND DOCU	MENT #)
_	(CORPORATE NAME AND DOCU	MENT #)
_	(CORPORATE NAME AND DOCU	MENT #)
_	(CORPORATE NAME AND DOCU	MENT #)
		MENT #)

COVER LETTER

TO:	Registration Section Division of Corporations		
SURI	JEN Florida 46 LLC		
3000		Limited Liability Con	npany
Dear S	Sir or Madam:		
The er	nclosed Amendment or Cancellation of State	ement of Authority an	nd fee(s) are submitted for filing.
	return all correspondence concerning this r		
Rich	ard Jerman		
	Name of Person		
Sun	Terra Communities		
	Firm/Company	···	-
1750) W. Broadway, Suite 111		
	Address		
Ovie	do, FL 32765		
	City/State and Zip Code		
rjerm	an@sunterracommunities.com		
	E-mail address: (to be used for future ann	nual report notification	1)
For fur	ther information concerning this matter, ple	ase call:	
Richa	ard Jerman	407	Daytime Telephone Number
	Name of Person	Area Code	Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	Registrati	G ADDRESS: ion Section of Corporations 6327

Tallahassee, Florida 32314

2661 Executive Center Circle Tallahassee, Florida 32301

AMENDMENT OR CANCELLATION OF STATEMENT OF AUTHORITY

FIRST	The name of the limited liability company is: JE	N Florida 46 LLC	 -	<u> </u>	-
SECON	D: The Florida Document number of the limited li	ability company is: L2200001114	19		_
THIRD	: The street address of the limited liability compan	y's principal office is:			
	Suite 111		_		
	Oviedo, FL 32765				
	The mailing address of the limited liability comp	pany's principal office is:	- Ā	202	
	Suite 111		- i=\ ≱:	2023 AUG	
	Oviedo, FL 32765		IASSI	IG 22	
FOURTH: The date the statement of authority became effective is: 8/18/2023					
FIFTH:	The statement of authority is cancelled.		OF SIAIC E. FLORIDA	AM 10: 36	
OR			DA DA	92	
	The amendment to the statement of author	rity is			
	Authority to act on behalf of the Company is granted to Dan				
	Edwards in his capacity as Vice Presid	dent, and any duties and	_		
	obligations by Denver Marlow have been terminated.				
		See attached Signa	ture Pg.		
Signature	of authorized representative	Typed or printed name of	fsignature	_	

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

CR2E145 (2/14)

Signature Page <u>To</u> Statement of Authority

JEN 7 VA LLC,

a Delaware limited liability company

By: JEN 7 LP,

a Delaware limited partnership, its co-manager

JEN 7 GP LLC, a Delaware limited liability company, By:

its general partner

By: Name: Ethan Leibowitz

Its: President