

L220000040886

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

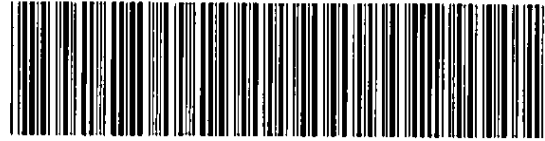
(Document Number)

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RECEIVED
2022 AUG - 8 PM 3:53
TALLAHASSEE, FL 323

FILED
2022 AUG - 8 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FL 323

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 869681 4355850

AUTHORIZATION : *[Signature]*

COST LIMIT : \$25.00

ORDER DATE : August 8, 2022

ORDER TIME : 1:16 PM

ORDER NO. : 869681-005

CUSTOMER NO: 4355850

DOMESTIC AMENDMENT FILING

NAME: PB PARK OF AMMERCE JV, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PB Park of Commerce JV, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Amy L. Evard

Name of Person

Barnes & Thornburg LLP

Firm/Company

201 S. Main Street, Suite 400

Address

South Bend, Indiana 46601

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amy L. Evard

574

296-2526

at (_____) _____

Name of Person

Area Code

Daytime 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)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2022 AUG -8 AM 8:31

PB Park of Commerce JV, LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

SECRETARY OF STATE
6800 GULF BLVD., SUITE 100
TALLAHASSEE, FL 32309-3000
(904) 493-0700
www.flsos.org

The Articles of Organization for this Limited Liability Company were filed on 2/4/2022 and assigned
Florida document number L22000040886.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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 Changing Registered Agent, Signature of New Registered Agent

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> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|---------------|-----------------------------------|---|
| MGR | Jason Sturman | 8888 Keystone Crossing Suite 1150 | <input checked="" type="checkbox"/> Add |
| | | Indianapolis, Indiana 46240 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | Grant Goldman | 8888 Keystone Crossing Suite 1150 | <input checked="" type="checkbox"/> Add |
| | | Indianapolis, Indiana 46240 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
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