(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
<u> </u>		

Office Use Only



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(٦) iTT CEIVED CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 170272 5124005

AUTHORIZATION :

COST LIMIT : \$ 300.00

ORDER DATE: October 26, 2021

ORDER TIME : 9:40 AM

ORDER NO. : 170272-005

CUSTOMER NO: 5124005

--

FOREIGN FILINGS

NAME: AIMCO FLAMINGO HEALTH CLUB,

LLC

CORPORATE
LIMITED PARTNERSHIP
LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT# 61594

EXAMINER:

COVER LETTER

Divi	sion of C	Corporations			
SUBJECT:	AIMCO	Flamingo Health Club, LLC			
50202011	•	Name of Foreig	gn Limited Lia	bility Co	mpany
Dear Sir or N	Madam:				
The enclosed	d applica	ation, certificate and fee(s)	are submitted	for filing	g.
Please return	all corr	espondence concerning th	is matter to the	following	ng:
Debra McDo	nald				
		Name of Person		_	
AIR Commun	nities				
		Firm/Company		_	
4582 S. Ulste	er St., Su	ite 1700		_	
		Address			
Denver, CO 8	30237				
		City/State and Zip Cod	e	_	
debra.mcdon	ald@aire	communities.com			
E-mail add	iress: (to	be used for future annua	l report notifica	ation)	
For further in	nformati	on concerning this matter,	please call:		
Debra McDor		,	303 at (757.8	101
	Name	e of Person		e & Dayt	ime Telephone Number
Regi: Divis P.O.	sion of C Box 63	Section Corporations		Divisio The Ce 2415 N	ation Section on of Corporations ntre of Tallahassee . Monroe Street, Suite 810 ssee, FL 32303
		check for the following			_
□\$25 Filing	Fee	■ \$30 Filing Fee & Certificate of Status	☐ \$55 Filing Certified (☐ \$60 Filing Fee, Certificate of Status & Certified Copy

TO: Registration Section

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: AIMCO Flamingo Health Club, LLC	on the records of the Florida	a Department of		
Enter new principal office address, if applicable:				
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)				
Enter new mailing address, if applicable: (Mailing address			<u>ن</u> ابنا	202
MAY BE A POST OFFICE BOX)			<u> </u>	1301
2. The Florida document number of this limited liab	oility company is: M060000	00191		27
Jurisdiction of its organization: Delaware				جع رف "
4. Date authorized to do business in Florida: 1/11/2			, ri ;	
SECTION II (5-9 complete only the applicable c				
5. New name of the limited liability company: AIF (must	R Flamingo Health Club, LL contain "Limited Liability C	C ompany, " "L.L.	C.," or "L	.LC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or man must contain "Limited Liability Company," "L.L.C.	aging members adopting the	s business in Flor alternate name.	rida and at The alterna	tach a ate name
6. If amending the registered agent and/or registered registered agent and/or the new registered office ade		rds, <u>enter the nan</u>	ne of the n	<u>iew</u>
Name of New Registered Agent:				
New Registered Office Address:	Euton Elon	ida Street Addres		
	Enter Plon		3	
	City	, Florida _	Zip Code	?
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent the provisions of all statutes relative to the proper a and accept the obligations of my position as register document is being filed to merely reflect a change in liability company has been notified in writing of this	and agree to act in this cape nd complete performance of red agent as provided for in the registered office addres	my duties, and I Chapter 605, F.S	am famili S. Or, if thi	ar with is

Title/ Capacity	Name	Address Typ	pe of Actio	
MGRM	AIMCO/Bethesda Holdings, Inc.	4582 S. Ulster St., Suite 1700	□Add	
		Denver, CO 80237	. ≣Rem	
MGRM	AIR/Bethesda Holdings, Inc.	4582 S. Utster St., Suite 1700	■Add	
		Denver, CO 80237	□Rem	
			□Add	
		TALE	2021 (Rem	
			[27][]Add	
		<u>日介</u> 日本 2017年 日本 日本	.EJAdd くり くり とり	
			□Rem	
			□Add	
aforemention	a certificate, if required: no more than 90 ned amendment(s), duly authenticated bunder the law of which this entity is organized.	y the official having custody of records in the	Remo	

Filing Fee: \$25.00

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "AIMCO FLAMINGO HEALTH

CLUB, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME

TO "AIR FLAMINGO HEALTH CLUB, LLC" ON THE TWENTY-SECOND DAY OF

SEPTEMBER, A.D. 2021, AT 1:30 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED

LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT

HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS

OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AIR FLAMINGO HEALTH CLUB, LLC" WAS FORMED ON THE TENTH DAY OF JANUARY, A.D. 2006.



Authentication: 204518647

Date: 10-26-21