Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FLAGLER DEVELOPMENT GROUP, LLC

Account Number : I20020000144 Phone : (305)520-2344 Fax Number : (305)520-2400

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FDG JOHN YOUNG PARKWAY LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

6/2/1805

COVER LETTER

TO: Registration Section Division of Corporations:	
SUBJECT: FDG John Young P	Parkway LLC
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are	submitted for filing.
Please return all correspondence concerning this m	
	2
Kolleen Cobb	
Name of Person	
Florida East Coast Industries	s, LLC
Firm/Company	<i>></i>
117 NE 1st Ave, 11th Floo	
Address	or si
Miami, FL 33132	ŕ
City/State and Zip Code	
kolleen.cobb@feci.com E-mail address: (to be used for future annual re	most radification)
E-mail address: (to be used for future annual re-	port northeation)
For further information concerning this matter, ple	ease call:
Brianna Hernandez	305 520-2427
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	Talladasse, Trolled 283 C
Enclosed is a check for the following amount:	
(a) \$25 Filing Fee San San Spiling Fee & Certificate of Status	\$55 Filing Fee & \$60 Filing Fee, Certified Copy Certificate of Status &
Certificate of Status	Certified Copy Certified Copy
CR2E055 (9/15)	

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: FDG John Young Parkway I				
Enter new principal office address, if applicable:	117 NE 1st Ave. 11th Floor			
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33132			
Enter new mailing address, if applicable:	117 NE 1st Ave, 11th Floor			
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33132			
		22	28	
2. The Florida document number of this limited lin	ability company is: M08000002845	; 		
3. Jurisdiction of its organization: Delaware		<u>.</u>	26	
4. Date authorized to do business in Florida: 06/		· .	D	į
SECTION II (5-9 complete only the applicable changes)		0210	ـــــ ئن	
5. New name of the limited liability company: (must	st contain "Limited Liability Company," "L.L.	.C.," or	"LLC."	')
(If name unavailable, enter alternate name adopter copy of the written consent of the managers or must contain "Limited Liability Company," "L.L.	maging members adopting the alternate name.	orida and The alte	attach mate ni	e ame
6. If amending the registered agent and/or register registered agent and/or the new registered office a	red officer address on our records, enter the na address here:	me of the	: ne <u>y</u>	
Name of New Registered Agent: New Registered Office Address: 117 NE 15	st Avenue. 11th Floor			
	Table 7 to line of the state			
M	liami , Florida , Florida	$\frac{33132}{Zin Ce}$! ode	
	\$77.y			

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 the amendn		in accordance with 605.0902 (1)(e), inc	licate that change:
itle/ Capacity	Name	Address	Type of Action
 .			Add
			Remov
<u> </u>			Add
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			∑ Add T
			G- ST Remov
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<u>.</u>			🗍 Add
aforementio	under the law of which this entity	led by the official having custody of re-	

Filing Fee: \$25.00