

M09 000000 2720

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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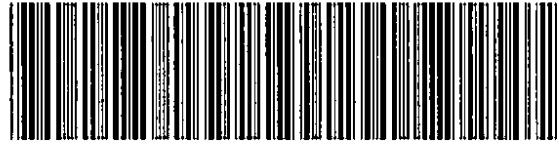
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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S. YOUNG

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ATTORNEYS AT LAW

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July 15, 2020

VIA FED EX

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

Re: Plaza Spa Ocean Waters LLC – M09000002723
Soho Ocean Waters LLC – M09000002720

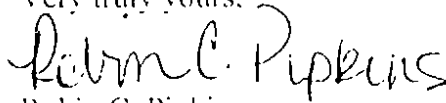
Dear Registration Section:

Enclosed please find the following applications to be filed with the Division of Corporations in connection with the above referenced LLCs:

1. **Plaza Spa Ocean Waters LLC** - Application by Foreign Limited Liability Company to File Amendment to Certificate of Authority to Transact Business in Florida with check no. 519937 in the amount of \$55.00 (filing fee and certified copy); and
2. **Soho Ocean Waters LLC** - Application by Foreign Limited Liability Company to File Amendment to Certificate of Authority to Transact Business in Florida with check no. 519938 in the amount of \$55.00 (filing fee and certified copy).

If you have any questions or need any additional information regarding the enclosed, please contact me at 904-598-9929. Thank you in advance.

Very truly yours,


Robin C. Pipkins
Legal Assistant

/rep
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SOHO OCEAN WATERS LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gregory Marcus, Esq.

Name of Person

Arbor Realty Trust, Inc.

Firm/Company

333 Earle Ovington Boulevard, Suite 900

Address

Uniondale, New York 11553

City/State and Zip Code

GMarcus@arbor.com

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

For further information concerning this matter, please call:

John Bishar (JBishar@arbor.com)

Name of Person

at (516) 506-4590

Area Code & Daytime Telephone Number

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

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☒ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

**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)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: SOHO OCEAN WATERS LLC

Enter new principal office address, if applicable: 333 Earle Ovington Boulevard

(Principal office address

MUST BE A STREET ADDRESS)

Suite 900

Uniondale, New York 11553

Enter new mailing address, if applicable:

(Mailing address

MAY BE A POST OFFICE BOX)

N/A

2. The Florida document number of this limited liability company is: M09000002720

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: July 14, 2009

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: N/A
(must contain "Limited Liability Company," "L.L.C." or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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: N/A

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

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

Authorized Person (AP)

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AP	Jesberger, Jaclyn	333 Earle Ovington Boulevard, Suite 900	<input type="checkbox"/> Add
		Uniondale, New York 11553	<input checked="" type="checkbox"/> Remove
AP	Marcus, Gregory	333 Earle Ovington Boulevard, Suite 900	<input checked="" type="checkbox"/> Add
		Uniondale, New York 11553	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized. N/A in Delaware

Gregory Marcus

Signature of the authorized representative

Gregory Marcus, Esq.

Typed or printed name of signee

Filing Fee: \$25.00