M09000002723

(Requestor's Name)
(Address)
(Address)
(/1001033)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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COVER LETTER

TO:

CR2E055 (9/15)

Registration Section

Division of Corporations PLAZA SPA 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) Area Code & Daytime Telephone Number Name of Person Mailing Address: Street Address: Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount: ☐ \$30 Filing Fee & **■** \$55 Filing Fee & □ \$60 Filing Fee, □\$25 Filing Fee Certificate of Status Certified Copy Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACTS BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

Enter new principal office address, if applicable:	
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)	333 Earle Ovington Boulevard, Suite 900
	Uniondale, New York 11553
Enter new mailing address, if applicable: (Mailing address)	
MAY BE A POST OFFICE BOX)	
2. The Florida document number of this limited lia	ability company is: M09000002723
Jurisdiction of its organization: Delaware	
4. Date authorized to do business in Florida: July	14, 2009
SECTION II (5-9 complete only the applicable	
 New name of the limited liability company: New name of the limited liability company: New name of the limited liability company. 	/A t contain "Limited Liability Company, " "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or mamust contain "Limited Liability Company," "L.L.C	I for the purpose of transacting business in Florida and attach a naging members adopting the alternate name. The alternate name C." or "LLC.")
6. If amending the registered agent and/or registered registered agent and/or the new registered office a	
registered agent and/or the new registered office a	ddress here:
Name of New Registered Agent: N/A	

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change: Authorized Person (AP)					
itle/ Capacity	Name	Address	Type of Action		
AP	Jesberger, Jaclyn	333 Earle Ovington Boulevard, Suite 900	□Add		
		Uniondale, New York 11553	≣Remov		
AP Marcus, Gregory	Marcus, Gregory	333 Earle Ovington Boulevard. Suite 900	= Add		
	Uniondale, New York 11553	□Remov			
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
		□Remov			
			DAdd		
			□Remov		
			□Add		
aforemention	ned amendment(s), duly authentiunder the law of which this entity	than 90 days old, evidencing the cated by the official having custody of records in the vis organized. N/A in Delaware yory Marcus atthe of the authorized representative	Remov		

Filing Fee: \$25.00