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(((H110000903083)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

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Fax Number : (850)878-5368

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **ALCURT NAPLES LLC**

Certificate of Status	0
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Page Count	04
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COVER LETTER

	on Section of Corporations		
SUBJECT:		Alcurt Naples LLC gn Limited Liability Co	
Dear Sir or Madan		go Examed Discounty Co	mpany
The enclosed appl	ication, certificate and fee(s) are submitted for filing	5.
Please return all co	orrespondence concerning th	is matter to the following	ng:
	Stephanie Briggs	<u></u>	
	Name of Person		
A	apen Square Management, Inc.		
·	Firm/Company		
	380 Union Street, Suite 300		
	Address		
٠.	West Springfield, MA 01089		
	City/State and Zip Code		
	atephanie_briggs@uspensquare		
E-mail address; (to be used for future annual	report notification)	
For further informa	tion concerning this matter,	please call:	
Step	ohanic Briggs	st ()	439-6380
Nan	ne of Person	Area Code & Daytii	me Telephone Number
STREET/C	OURIER ADDRESS:		ING ADDRESS:
Registration		Registration Section Division of Corporations	
Clifton Bull	Corporations ding		on of Corporations lox 6327
2661 Execu	tive Center Circle Florida 32301		assee, Florida 32314
Speciosed is a check Specios Filing Fee	for the following amount: \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

1, Na Sta	ame of limited ilability company as it appears on the records of the Florida Department of the Alcurt Naples LLC
2. Ju	risdiction of its organization: Delaware
3. Da	te authorized to do business in Florida: 10/04/2010
	SECTION II (4-7 complete only the applicable changes)
	he amendment changes the name of the limited liability company, when was the nge effected under the laws of its jurisdiction of organization? 04/04/2011
5. Ne	w name of the limited liability company: Naples Amberley LLC (must end with "Limited Liability Company," "L.L.C.," or "LLC.")
Florid	ne unavailable, enter alternate name adopted for the purpose of transacting business in a and attach a copy of the written consent of the managers or managing members adopting ernate name. The alternate name must end with "Limited Liability Company," "L.L.C."
5. If t	ne amendment changes the period of duration, indicate new period of duration:
/, Ifti n/a	ne amendment changes the jurisdiction of organization, indicate new jurisdiction:
	ne amendment corrects any false statement, indicate the statement being corrected and the ection: 1/a
ame	ched is an original certificate, no more than 90 days old, evidencing the aforementioned indment(s), duly authenticated by the official having custody of records in the jurisdiction of the law of which this entity is organized. BY Nepra Manager LLC, its manager, by Nopea Property Investors, Inc., its manager Signature of a requirer or the authorized representative of a member Jeffrey M Strole Assistant Vice President Typed or printed name of signee

Filing Fee: \$25.00

MPR -6 AM 8: 39

FIG07 - 05/06/2009 C T System Online

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "ALCURT NAPLES LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "NAPLES AMBERLEY LLC", THE FOURTH DAY OF APRIL, A.D. 2011, AT 11:26 O'CLOCK A.M.

4862168 8320

110385532

DATE: 04-06-11

AUTHENTICATION: 8675370

You may verify this certificate online at corp. delaware.gov/authver.shtml