

M110000000145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

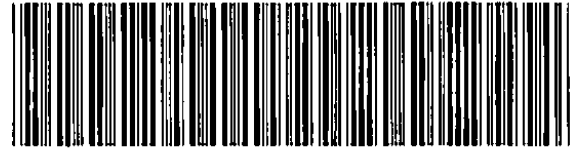
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000356618750

Office
Tallahassee, Florida

2020 DEC 16 PM 2:10

2020 DEC 15 23:10:41

DEC 17 2020

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 575377 7527656

AUTHORIZATION

[Handwritten Signature]

COST LIMIT : \$ 25.00

ORDER DATE : December 16, 2020

ORDER TIME : 1:03 PM

ORDER NO. : 575377-005

CUSTOMER NO: 7527656

FOREIGN FILINGS

NAME: STAR HHM GP, L.L.C

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT# 61594

EXAMINER: _____

**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: Star HHM GP, L.L.C.

Enter new principal office address, if applicable:

510 Walnut Street, 9th Floor

(Principal office address

Philadelphia, PA 19106

MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

510 Walnut Street, 9th Floor

(Mailing address

Philadelphia, PA 19106

MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M11000000142

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 01/11/2011

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

5. New name of the limited liability company: _____
(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: _____

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.

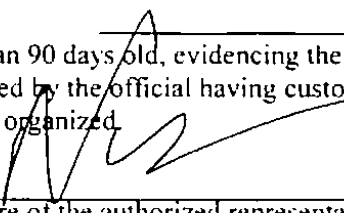
If Changing Registered Agent, Signature of New Registered Agent

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:
See below

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Member	Star HHM JV, LLC	591 W Putnam Ave	<input type="checkbox"/> Add
		Greenwich, CT 06830	<input checked="" type="checkbox"/> Remove
Member	Southpaw AP Buyer LLC	510 Walnut Street, 9th Floor	<input checked="" type="checkbox"/> Add
		Philadelphia, PA 19106	<input type="checkbox"/> Remove
Authorize	Naveen Kakarla	510 Walnut Street, Penn Mutual Towers	<input type="checkbox"/> Add
		Plantation, FL 33324	<input checked="" type="checkbox"/> Remove
Authorize	Naveen Kakarla	510 Walnut Street, 9th Floor	<input checked="" type="checkbox"/> Add
		Philadelphia, PA 19106	<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.



Signature of the authorized representative

Naveen Kakarla

Typed or printed name of signee

Filing Fee: \$25.00