## MO26 Get of 1 Division of Corporati in

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name Account Number : FCA00;

Fax Number

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

Rmail	Address:			

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GF LAKESIDE II LLC

Certificate of Status	0
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Help

https://etile.sunbiz.org/scripts/efilcovr.exe

JUN - Ř 2011 6/2/2011 N. Odligan

#### **COVER LETTER**

TO:	Registration Section Division of Corporations				
SUBJ			keside II LLC	<u> </u>	
	Name of Forei	ign Li	imited Liabili	ty Comp	рапу
Dear !	Sir or Madam:				
The e	nclosed application, certificate and fee(s	) are	submutted for	filing.	
Please	return all correspondence concerning the	his m	atter to the fo	llowing:	
	Barry P. Marcus				
	Name of Person				
	GF Lakeside II LLC				
	Firm/Company				
	50 N Water St				
	Address				
	South Norwalk, CT 06854				
	City/State and Zip Co	de			
Ë-1	nail address: (to be used for future annu-	al rep	ort notification	on)	
For fi	rther information concerning this matte	r, ple	ase call:		
	Barry P. Marcus	at			354-5000
	Name of Person		Area Code &	L Daytin	ne Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallabassee, Florida 32301			Registr Division P.O. Be	and ADDRESS: ration Section on of Corporations ox 6327 asser, Florida 32314
	sed is a check for the following amou Filing Fee 530 Filing Fee & Certificate of Statu		]\$55 Filing l Certified Co		S60 Filing Fee, Certificate of Status & Certified Copy



June 3, 2011

### FLORIDA DEPARTMENT OF STATE Division of Corporations

CT

SUBJECT: GF LAKESIDE II LLC

REF: M11000002661

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Regulatory Specialist II FAX Aud. #: E11000144998 Letter Number: 311A00013593

# 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.	Name of limited liability company as it appears on the records of the Florida Department of State: GF Lukeside II LLC
2,	Jurisdiction of its organization: Delaware
3.	Date authorized to do business in Florida: May 24, 2011
	SECTION II (4-7 complete only the applicable changes)
4,	If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization?
5.	New name of the limited liability company: Lakeside Conservation Land, LLC (must end with "Limited Liability Company," "L.L.C.," or "LLC.")
FI th	name unavailable, enter alternate name adopted for the purpose of transacting business in orida and attach a copy of the written consent of the managers or managing members adopting a alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." "LLC.")
6,	If the amendment changes the period of duration, indicate new period of duration:
7.	If the amendment changes the jurisdiction of organization, indicate new jurisdiction:
8.	If the amendment corrects any false statement, indicate the statement being corrected and the correction:
9.	Attached is an original certificate, 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 a member or the authorized representative of a member
	Burry P. Marcus
	Typed or printed name of signee
	Filing Fee: \$25.00

FIOO? - 03/06/2000 C. F. Byssein Online

# Delaware

DAGE 1

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT

COPY OF THE CERTIFICATE OF AMENDMENT OF "GF LAKESIDE II LLC",

CHANGING ITS NAME FROM "GF LAKESIDE II LLC" TO "LAKESIDE

CONSERVATION LAND, LLC", FILED IN THIS OFFICE ON THE SECOND DAY

OF JUNE, A.D. 2011, AT 9:40 O'CLOCK A.M.

4986378 8100

110679824

You may verify this certificate online at corp.delaware.gov/authwar.shtal

jafrey W. Bullock, Secretary of State

DTHENTY CATION: 8803481

DATE: 06-02-11

State of Delaware Secretary of State Division of Corporations Delivered 09:45 AM 06/02/2011 FILED 09:40 AM 06/02/2011 SRV 110679824 - 4986378 FILE

4.00

## STATE OF DELAWARE CERTIFICATE OF AMENDMENT

is follows:	of Formation of the limited !	iability company is hereby ar
To change its name	to from GF Lakeside II LLC to Lak	eside Conservation Land, LLC.
N WPTNESS	WHITE PAR the undersions	d have evented this Contifica
IN WITNESS	WHEREOF, the undersigned	d have executed this Certifics
	·	
	·	