

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000409462 3)))





H220004094623ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

	÷.,	٠	
٠	~	٠	

Division of Corporations Fax Number : (350)517-6393 Please honor original date 12/06/2022

From:

Account Name : C T CORPORATION SYSTEM Account Number : 7CA000005023 Phone : (954)208-0945 Fix Number : (614)573-3996

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

Email Address:

2022 (EL. -) Pin 1: 44

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GAINESVILLE DAKOTA CANYON LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

DEC 1 2 2022 A. LUNT

Please honor original date 12/06/2022

Electronic Filing Menu

Corporate Filing Menu

Help

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: Gainesville Dakota Canyon LLC 67 Hunt Street, Suite 206 Enter new principal office address, if applicable: Agawam, MA 01001 (Principal office address MUST BE A STREET ADDRESS) 67 Hunt Street, Suite 206 Enter new mailing address, if applicable: (Mailing address Agawam, MA 01001 MAY BE A POST OFFICE BOX) 1022 DEC - 6 AH 11: 2. The Florida document number of this limited liability company is: M12000002377 3. Jurisdiction of its organization: 4. Date authorized to do business in Florida: <u>April 30, 2012</u> 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 Ziv 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

۰.

٠

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:

Title/ Capacity	<u>Name</u>	<u>Address</u> <u>T</u>	ype of Action
			🗆 🗆 🗆 🗆
			🗋 Remove
			🗆 Add
			_ DRemove
			🗆 Add
			🗍 Remove
			🗆 Add
aforementioned a	ificate, if required: no more than 90 mendment(s), duly authenticated by the law of which this entity is organ	the official having custody of records in the	
jansultion under		re of the authorized representative	
	Signatu	re of the authorized representative sa Property Investors, Inc., the manager of	

Filing Fee: \$25.00

FL007 - 3/05/2020 Webers Kluwer Onling