9 100000/09/01 (Requestor's Name) (Address) 300286289463 (Address) (City/State/Zip/Phone #) 16 HAY 31 - 811 PICK-UP WAIT MAIL (Business Entity Name) ယ္ ၀ (Document Number) 05/31/16--01005--020 **25.00 Certificates of Status ____ Certified Copies Special Instructions to Filing Officer:

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TO: Registration Section Division of Corporations THE PALMS OF VENICE, LLC SUBJECT:	TO: Registration Section Division of Corporations SUBJECT: THE PALMS OF VENICE, LLC Name of Limited Liability Company The enclosed Atticles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: ADRIAN MIDDLETON MIDDLETON & MIDDLETON MIDDLETON & MIDDLETON Fort LAUDERDALE, FL 33316 FORT LAUDERDALE, FL 33316 For further information concerning this matter, please call: ADRIAN MIDDLETON ADDLETON COM E-mail address: to be used for future annual report nonfication) For further information concerning this matter, please call: ADRIAN MIDDLETON, ESQ. Name of Person ME ADRIAN MIDDLETON, ESQ. Name of Person Matter information concerning this matter, please call: ADRIAN MIDDLETON, ESQ. Name of Person S55.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed) MALLINC ADDRESS: Registration Section Division of Corporations Provision of Corporations Provision of Corporations Provisions Clamber	Patty Miexon	Page 3 of 6		2016-05-31 18:06:07 (GI	MT) 13053	971001 From	m: AMDI USA IN	IC AMD	USA I
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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: The Palms of Venice LLC	
Enter new principal office address, if applicable:	
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)	
Enter new mailing address, if applicable: (<u>Mailing address</u> <u>MAY BE A POST OFFICE BOX</u>)	
2. The Florida document number of this limited liability company is:	
3. Jurisdiction of its organization: Defautice	<u>.</u>
4. Date authorized to do business in Florida: $\frac{12/13/12}{520}$	-
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 office address here:	
Name of New Registered Agent;	
New Registered Office 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	

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. 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 Name Address Type of Action <u>АМ</u>М KSV1 Chg MGR 1323 SE 17Th St Add # 14(1 🖊 Remove Ff Landersolalp 3334 Remove Miles Forman MGR 1323 5 17th of #140 Add Fort Landerdalle, 7 FL_333/ Remove 16 HAY 31 FE Ð 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 critity is organized, Signature of the authorized representative Jordan Metrike Typed or printed name of signee

Filing Fee: \$25.00