M13000003331

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	<i></i>
PICK-UP		MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only

A. RIVERS FEB 2 0 2023



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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)

Name of limited liability Company as it appears TENDESIS 1016T DO 1 D 1 C	on the records of the Flo	orida Department of
State: TERRENO 101ST ROAD 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: (Mailing address MAY BE A POST OFFICE BOX)		
2. The Florida document number of this limited lial	bility company is: M1300	00002331
3. Jurisdiction of its organization: DELAWARE		
4. Date authorized to do business in Florida: 4/12/		<u> </u>
SECTION II (5-9 complete only the applicable c	hanges)	
New name of the limited liability company: (must	contain "Limited Liabilit	ty Company, " "L.L.C.," or .: LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or man must contain "Limited Liability Company," "L.L.C	aging members adopting	ting business in Florida and attach at the alternate name. The alternate name
6. If amending the registered agent and/or registered registered agent and/or the new registered office ad	d officer address on our redress here:	ecords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter F	Torida 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

itle/ Capacity	<u>Name</u>	<u>Address</u>	Type of Actio
.P	Stephen Lueck	101 Montgomery Street, Suite 200	\equiv \equiv \frac{1}{2} \lambda \text{dd}
		San Francisco, CA 94104	□Remo
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aforemention		than 90 days old, evidencing the cated by the official having custody of records in is organized.	Remo

Typed or printed name of signee

Filing Fee: \$25.00