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.

(((H15000093780 3)))



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

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850) 205-8842

Fax Number

: (850)878-5368

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

| Email | Address: | | |
|-------|----------|--|--|
| | | | |

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN IA MANAGEMENT, L.L.C.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 05 |
| Estimated Charge | \$25.00 |

APR

Electronic Filing Menu Corporate Filing Menu

4/16/2015

COVER LETTER

| | istration S ision of C | Section Corporations | | | | | | |
|--|---|---|----------------------|---|---|--|--|--|
| SUBJECT | invenTn | ast Property Management, LLC | | | | | | |
| | Name of Foreign Limited Liability Company | | | | | | | |
| Dear Sir or | Madam: | | | | | | | |
| The enclose | ed applica | tion, certificate and fee(s) are | submitted | for filing. | | | | |
| Please retui | n all corr | espondence concerning this r | natter to the | following: | | | | |
| Kim Band | | | | | | | | |
| | | Name of Person | | _ | | | | |
| InvenTrust ! | Properties C | Corp. | | | | | | |
| | | Firm/Company | | | | | | |
| 2809 Butter | field Road | | | _ | | | | |
| | | Address | | | | | | |
| Oak Brook, | IL 60523 | | | _ | | | | |
| | | City/State and Zip Code | | | | | | |
| kim.band@ | InvenTrusti | Properties.com | | | | | | |
| E-mail a | ddress: (t | o be used for future annual re | port notific | ation) | | | | |
| For further | informati | on concerning this matter, pl | ease call: | | | | | |
| Kim Band | | | 630 | 570-085 | 4 | | | |
| <u> </u> | Nam | e of Person | | le & Daytin | ne Tetephone Number | | | |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 | | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tullahassee, Florida 32314 | | ration Section on of Corporations ox 6327 | | | | |
| Enclosed i | ng Fee | for the following amount: \$30 Filing Fee & Certificate of Status | S55 Fili Certifie | | ☐ \$60 Filing Fee, Certificate of Status & Certified Copy | | | |

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)

| AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA |
|---|
| SECTION I (1-4 must be completed) |
| 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: 1. IA Management, L.L.C. 2. The Florida document number of this limited liability company is: 1. Management of this limited liability company is: 1. Management of this limited liability company is: |
| 2. The Florida document number of this limited liability company is: M13000007897 |
| 3. Jurisdiction of its organization: |
| 4. Date authorized to do business in Florida: 12/13/2013 |
| SECTION II (5-9 complete only the applicable changes) |
| 5. New name of the limited liability company: InvenTrust Property Management, LLC |
| (must contain "Limited Liability Company," "L.L.C.," or "Ll.C.") |
| (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.IC." or "l.I.C.") 6. If amending the registered agent and/or registered office 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 |
| 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: The sole member has undergone a name change. The new name is listed below; Title/ Capacity Type of Action <u>Name</u> <u>Address</u> Member InvenTrust Properties Corp. 2809 Butterfield Rd., Oak Brook, IL 60523 D Add 2809 Butterfield Rd., Oak Brook, IL 60523 □ Remove ☐ Add ☐ Remove □ Add ☐ Remove D Add ☐ Remove D Add ☐ 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 Scott W. Wilton, Sec., InvenTrust Properties Corp., a MD corp.,

Filing Fee: \$25.00

Typed or printed name of signee mamber, IA Management, L.L.C.

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "IA MANAGEMENT, L.L.C.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "INVENTRUST PROPERTY MANAGEMENT, LLC", THE SIXTEENTH DAY OF APRIL, A.D. 2015, AT 8:43 O'CLOCK A.M.

5439043 8320

150520180

You may vorify this certificate online at corp. delaware, gov/authwer, shtml

AUTHENTY CATION: 2296490

DATE: 04-16-15