Division of Corporations

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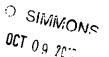
Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (512)418-6949 Phone : (954)208-0845 Fax Number

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MONOGRAM RESIDENTIAL DELRAY II PROJECT OWNER, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$55.00



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 app		f the Florida Department of		
State: Monogram Residential Delray II Project	et Owner, LLC			
Enter new principal office address, if applicable	e: 18 Broad Street,	Suite 300	<u> </u>	
, ,	Charleston, SC	29401	17 OCT -6	
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)			55 -6	
			、	
Enter new mailing address, if applicable:	18 Broad Street,	Suite 300		
(Mailing address	Charleston, SC	29401	м та	
MAY BE A POST OFFICE BOX)				
2. The Florida document number of this limited	d liability company is	M13000008027		
. Delaware				
Jurisdiction of its organization: Delaware Delaware Delaware Delaware	12/19/2013	·.		
SECTION II (5-9 complete only the applical		(Owner 11C		
5 New name of the limited liability company:	must contain "Limite	d Liability Company, " "L.L.	C.," or "LLC.")	
(If name unavailable, enter alternate name aduceopy of the written consent of the managers or most contain "Limited Liability Company," "L	pted for the purpose managing membersL.C." or "LLC.")	of transacting business in Flo adopting the alternate name.	rida and attach a The alternate name	
6. If amending the registered agent and/or registered agent and/or the new registered of fin	ce address here:	on our records, enter the nar	ne of the new	
Name of New Registered Agent: C T Corpora	ation System			
New Registered Office Address: 1200 South Pine Island Road				
	Plantation	Enter Florida Street Addre		
		Florida	Zip Code	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered the provisions of all statutes relative to the provided accept the obligations of my position as redocument is being filed to merely reflect a challability company has been notified in writing	agent and agree to coper and complete pagestered agent as pringe in the registered of this change.	rformance of my duties, and anded for in Chapter 605, F.	Tam familiar with S. Or, if this firm that the limited 1. Halpin Secretary	

8 If the amendment changes person, title or capacity in accordance with 605,0902 (1)(e), indicate that change: Adding A, Joshua Carper and GS Delray II Investors, LP as authorized persons; removing Monogram					
Residential Delray II Investors, LP as authorized person. Title/ Capacity Name		Address	Type of Action		
ice President uthorized Person	A. Joshua Carper	18 Broad Street, Suite 300, Charleston, SC 29-	tot <u></u> ∑Add		
		1. 1.91	Remove		
Member	GS Delray II Investors, LP	18 Broad Street, Suite 300, Charleston, SC 29	401 ∑Add		
			Remove		
MGRAI	Monogram Residential Delitay II Investors, LP	15601 Dalfus Pkwy, Ste. 600, Addison, TX 750)] Add		
			17 gpCT -6 At		
			Remove.		
			Add		
			Kemove		
aforementic	a certificate, if required; no more than 90 d med amendment(s), duly authenticated by the under the law of which this entity is organi	he official baving custody of records in the	:		
	91. c	re authorized representative			
	Signature of it	se authorized representative			

Filing Fee: \$25.00



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THAT THE SALD "MONOGRAM RESIDENTIAL
DELRAY II PROJECT OWNER, LLC", FILED A CERTIFICATE OF AMENDMENT,
CHANGING ITS NAME TO "GS DELRAY II PROJECT OWNER, LLC" ON THE
NINETEENTH DAY OF SEPTEMBER, A.D. 2017, AT 7:02 O'CLOCK P.M.

Authentication: 203351950

Date: 10-05-17