

M14000003417

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H14000120360 3)))



H140001203603ABCR

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To: Division of Corporations  
Fax Number : (850)617-6363

From: Account Name : FLAGLER DEVELOPMENT GROUP, LLC  
Account Number : I20020000144  
Phone : (305)520-2344  
Fax Number : (305)520-2400

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14 JUN -2 PM 1:15  
DIVISION OF STATE  
CORPORATIONS  
TALLAHASSEE FLORIDA

\*\*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  
SECTION 5 LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

T. Burch JUN 24 2014

H140001203603

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Section 5 LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jessica Alvarez

Name of Person

Firm/Company

2855 Le Jeune Rd., 4th Floor

Address

Coral Gables, FL 33134

City/State and Zip Code

jessica.alvarez@feci.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

\_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
Name of Person Area Code & Daytime Telephone 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  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy



June 2, 2014

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

SECTION 5 LLC  
2855 LEJEUNE ROAD, 4TH FLOOR  
ATTN: VINCENT SIGNORELLO AND KOLLEEN COB  
CORAL GABLES, FL 33134

SUBJECT: SECTION 5 LLC  
REF: M14000003417

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 JUN -2 PM 3:45

RECEIVED

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You submitted the wrong type of form, you need to submit a Foreign LLC amendment.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tim Burch  
Regulatory Specialist II

FAX Aud. #: H14000120360  
Letter Number: 114A00011736

H14000120340 3

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of State: Section 5 LLC

2. Jurisdiction of its organization: Delaware

3. Date authorized to do business in Florida: 5/20/2014

SECTION II (4-7 complete only the applicable changes)

4. 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.")

5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change: Change MBR from FGL Property Company LLC to FDG Mezzanine Holdings LLC

7. Attached is an original 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.

[Handwritten signature]

Signature of the authorized representative

Kolleen O.P. Cobb, Vice President

Typed or printed name of signer

Filing Fee: \$25.00

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