

M1500000 3027

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

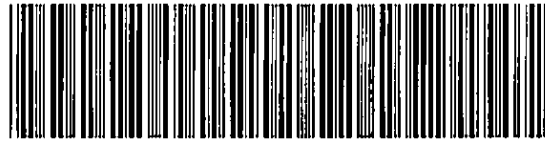
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
OCT 19 2022

Office Use Only



000394053030

RECEIVED

2022 OCT 18 PM 3:30

SECRETARY OF STATE
TALLAHASSEE, FL 32399

FILED

2022 OCT 18 AM 10:49

SECRETARY OF STATE
TALLAHASSEE, FL 32399

60

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 059554 7381795

AUTHORIZATION

COST LIMIT : \$25.00

ORDER DATE : October 18, 2022

ORDER TIME : 2:08 PM

ORDER NO. : 059554-070

CUSTOMER NO: 7381795

FOREIGN FILINGS

NAME: PURE LIVING ACQUISITION LLC

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pure Living Acquisition 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:

Sally Liu

Name of Person

Berkshire Residential Investments

Firm/Company

One Beacon Street, 24th Floor

Address

Boston, MA 02108

City/State and Zip Code

SLiu@berkshireresi.com

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

For further information concerning this matter, please call:

Sally Liu at (617) 556-8142

Name of Person Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

**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: Pure Living Acquisition LLC

Enter new principal office address, if applicable: Berkshire Residential Investments
One Beacon Street, 24th Floor
Boston, MA 02108

**(Principal office address
MUST BE A STREET ADDRESS)**

Enter new mailing address, if applicable: _____
**(Mailing address
MAY BE A POST OFFICE BOX)**

2. The Florida document number of this limited liability company is: M15000003027

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 4/22/2015

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 agent and/or the new registered office address here:

Name of New Registered Agent: Corporation Service Company

New Registered Office Address: 1201 Hays Street

Enter Florida Street Address

Tallahassee Florida 32301
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.

Alexis Whitel
Assistant Vice President

If Changing Registered Agent, **Signature of New Registered Agent**

FILED
2022 OCT 18 AM 10:49
SECRETARY OF STATE
TALLAHASSEE, FL

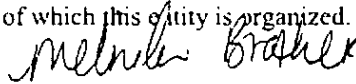
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

Name of person and title has changed.

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Authorized Person	Mary Beth Bloom	One Beacon Street, 24th Floor	<input checked="" type="checkbox"/> Add
		Boston, MA 02108	<input type="checkbox"/> Remove
Authorized Person	Melinda Brothers	One Beacon Street, 24th Floor	<input checked="" type="checkbox"/> Add
		Boston, MA 02108	<input type="checkbox"/> Remove
Authorized Signatory	Julie Burdick	15771 Redhill Avenue, Suite 110	<input type="checkbox"/> Add
		Tustin, CA 92780	<input checked="" type="checkbox"/> Remove
Authorized Signatory	David Veneziano	15771 Redhill Avenue, Suite 110	<input type="checkbox"/> Add
		Tustin, CA 92780	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> 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

Melinda Brothers

Typed or printed name of signee

Filing Fee: \$25.00