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	Division of Corpo	rations		
		(850)617-6383		
From:				
		CORPORATE CREATION	S INTERNATIONAL	INC.
	Account Number :	110432003053		
		(561)694-8107		
	Fax Number :	(561)694-1639		
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101

## 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 ap		records of the	Florida Dep	artiment of		
State: L&B CIP GLADES TWIN PLAZA, I						
Enter new principal office address, if applicab	ole: 302 Da	atura Street, S	uite 100			
(Principal office address MUST BE A STREET ADDRESS)	West I	alm Beach, F	L 33401	<u>-</u>	<u> </u>	
	<u></u>		· · · · · · · · · · · · · · · · · · ·	<del></del>		
Enter new mailing address, if applicable:	302 D	itura Street, Su	ite:100			
(Mailing address MAY BE A POST OFFICE BOX)	West I	alm Beach, FL	, 33401			
	<del></del>			<del></del>	<del></del>	
2. The Florida document number of this limite	d liability o	ompany is: Mi	15000004958			
		,		i v	, 201 <b>3</b>	
3. Jurisdiction of its organization: Delaware				<u> </u>	<u>-</u>	
4. Date authorized to do business in Florida: 06/24/2015						
SECTION II (5-9 complete only the applica					. 0	
5. New name of the limited liability company		•			~ ==	
:(	must contain	"Limited Lia	bility Compa	ny, " "L.L.C.," or	"LLC.")	
					12	
(If name unavailable, enter alternate name ado copy of the written consent of the managers of must contain "Limited Liability Company," "I	i managing r	nembers adont	nsacting busing the altern	ness in Florida and ate name. The alte	attach a mate name	
6. If amending the registered agent and/or registered agent and/or the new registered office	istered office ce address h	r eddress on o	ur records, <u>er</u>	ter the pame of the	e new	
Name of New Registered Agent: TSO Agent	Services, LL	С				
New Registered Office Address: 302 Datura S	Street, Suite	100				
		Ente	er Florida Sti			
	West Palm I	Beach		Florida 33401		
		City		Zip Co	de	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered the provisions of all statutes relative to the pround accept the obligations of my position as redocument is being filed to merely reflect a challiability company has been notified in writing a	agent and agent and agent and con egistered agent by in the re of this chang	gree to act in the plete performent as provided office to Ashley	ance of my di I for in Chapt address, I he Goldsmith	ities, and I am fam er 605. F.S. Or. if	illar with this the limited	

	liability company is a member-manag		
itle/ Capacity	Name	Address Ty	pe of Action
abr 	L&B Core Income Partners, LP	5910 N. Central Expressway, SUITE 1200	_ □Add
		DALLAS, TX 75206	_ ≅Remo
MBR 	SVAP III Glades Holdings, LLC	302 Datura Street, Suite 100	_ ■Add
		West Palm Beach, FL 33401	_ □Rċmo
MBR	L&B Realty Advisors, LLP	5910 N Contral Expressway, Suite 1200	_ □Add
		DALLAS, TX 75206	_ ≣Remo
			_ □Ádd
			Renio
			□Add
aforemention	certificate, if required: no more than 9 amendment(s), duly authenticated be not which this entity is org	on the official having custody of records in the	_ □Remo

Filing Fee: \$25.00