

# MISOURY S101

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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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TALLAHASSEE, FLORIDA

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# JONESFOSTER

JOHNSTON & STUBBS, P.A.

Cynthia "Cindy" F. Skwierc, FRP  
Paralegal  
(561) 650-8241  
Fax: (561) 650-5300  
cskwierc@jonesfooster.com

July 16, 2015

**Via FedEx**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Re: AW Palms West VIII, LLC**

Dear Sir or Madam:

Enclosed please find a Cover Letter, Application by Foreign Limited Liability Company to File Amendment to Certificate of Authority to Transact Business in Florida and Delaware certified copies of Certificates of Amendment and Legal Existence for the above-referenced entity. Also enclosed is this firm's check in the amount of \$60.00 in payment of the Amendment filing fee, certificate of status and certified copy.

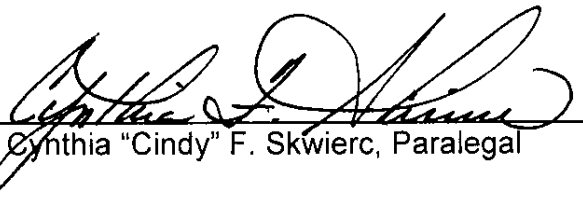
Kindly return the Certificate of Status and Certified Copy to me in the enclosed Fedex envelope at your earliest possible convenience.

In the meantime, should you have any questions regarding the enclosed, please don't hesitate to contact me.

Sincerely,

JONES, FOSTER, JOHNSTON & STUBBS, P.A.

By



Cynthia "Cindy" F. Skwierc, Paralegal

Enclosures

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**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: AW Palm West VIII, LLC

2. The Florida document number of this limited liability company is: M15000005101

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: June 29, 2015

**SECTION II (5-9 complete only the applicable changes)**

5. New name of the limited liability company: AW Palms West VIII, LLC  
(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 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** \_\_\_\_\_  
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.*

\_\_\_\_\_  
If Changing Registered Agent, Signature of New Registered Agent

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

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

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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_____	_____	_____	<input type="checkbox"/> Add
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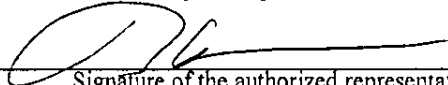
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9. Attached is a certificate, if required: no more than 90 days old, evidencing the  
aforementioned amendment(s), duly authenticated by the official having custody of records in the  
jurisdiction under the law of which this entity is organized.

  
\_\_\_\_\_  
Signature of the authorized representative

**Brian K. Waxman**  
\_\_\_\_\_

Typed or printed name of signee

**Filing Fee: \$25.00**

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# Delaware

PAGE 1

*The First State*


I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "AW PALM WEST VIII, LLC", CHANGING ITS NAME FROM "AW PALM WEST VIII, LLC" TO "AW PALMS WEST VIII, LLC", FILED IN THIS OFFICE ON THE TENTH DAY OF JULY, A.D. 2015, AT 10 O'CLOCK A.M.



5762027 8100

151033869

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 2545712

DATE: 07-10-15

STATE OF DELAWARE  
CERTIFICATE OF AMENDMENT

1. Name of Limited Liability Company: AW Palm West VIII, LLC
2. The Certificate of Formation of the limited liability company is hereby amended as follows:

The name of the Limited Liability Company is hereby changed to: AW Palms West VIII, LLC

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the 1st day of July, A.D. 2015.

By: 

Authorized Person(s)

Name: Brian K. Waxman

Print or Type

# Delaware

PAGE 1

## *The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AW PALMS WEST VIII, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TENTH DAY OF JULY, A.D. 2015.



5762027 8300

151033869

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 2545713

DATE: 07-10-15