

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 417-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (512) 418-6949
Fax Number : (954) 208-0845

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
MONOGRAM RESIDENTIAL MILE, LLC

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

2017 OCT -2 AM 11:39
TALLAHASSEE FLORIDA

FILED
17 SEP 29 AM 8:04
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Electronic Filing Menu Corporate Filing Menu Help

HONOR ORIGINAL DATE 09-29

D. SCOTT
OCT 3 2017

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: Monogram Residential Mile, LLC

Enter new principal office address, if applicable: 18 Broad Street, Suite 300

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

Charleston, SC 29401

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: M1500009904

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 12/10/2015

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

5. New name of the limited liability company: GS Mile, 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 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: C T Corporation System

New Registered Office Address: 1200 South Pine Island Road

Enter Florida Street Address

Plantation, Florida 33324

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

Laura Broderick
Assistant Secretary

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SEP 29 11 56 AM '17
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

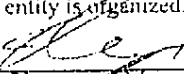
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

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

Adding A. Joshua Carper as authorized person.

Title/Capacity	Name	Address	Type of Action
Vice President Authorized Person	A. Joshua Carper	18 Broad Street, Suite 300, Charleston, SC 29401	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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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

A. Joshua Carper, Vice President

Typed or printed name of signee

Filing Fee: \$25.00

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 SECRETARY OF STATE
 INFORMATION SYSTEMS DIVISION

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "MONOGRAM RESIDENTIAL MILE, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "GS MILE, LLC" ON THE NINETEENTH DAY OF SEPTEMBER, A.D. 2017, AT 7:29 O'CLOCK P.M.

FILED
SEP 29 AM 8:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Jeffrey W. Bullock
Jeffrey W. Bullock, Secretary of State

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SR# 20176403010

Authentication: 203316558
Date: 09-29-17

You may verify this certificate online at corp.delaware.gov/authver.shtml