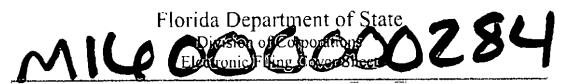
8/4/22, 9:44 AM

Division of Corporations



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From:

Account Name : C T CORPORATION SYSTEM

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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To:

From: Lexus Wir

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

2022-08-04 07:47:54 CST

SECTION I (1-4 must be completed)

State: Mainstay Coconut Creek LLC Enter new principal office address, if applicable:		
Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
The Florida document number of this limited liability company is:M16000000284	SEORET	2022 AUG
3. Jurisdiction of its organization: Delaware	<u> </u>	_ _
Date authorized to do business in Florida:	m _O	>
SECTION II (5-9 complete only the applicable changes)	57.74 71.83	AM 10: 3:
5. New name of the limited liability company:	or LLC.	₩
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida copy of the written consent of the managers or managing members adopting the alternate name. The must contain "Limited Liability Company," "L.L.C." or "LLC.")	and attach alternate n	a ame
6. If amending the registered agent and/or registered officer address on our records, enter the name of registered agent and/or the new registered office address here:	f the new	
Name of New Registered Agent:		
New Registered Office Address: Enter Florida Street Address		,
, Florida		
City Zi	p 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 the provisions of all statutes relative to the proper and complete performance of my duties, and I am	to comply familiar w	with ith iited

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	4F?

Page: 4 of 5

8. If the amendm	ent changes person, title or capacity	in accordance with 605.0902 (1)(e), indicate that cha	nge:
Title/ Capacity	Name	Address Tyr	e of Action
dember/Manager	SCG Atlas St. Andrews Holdings, L.L.C.	591 West Putnam Avenue	_ □Add
		Greenwich, CT 06830	■ Remove
AMBR	James Kane	591 West Putnam Avenue	_ □Add
		Greenwich, CT 06830	_ ⊠Remove
AMBR	Paul Ahis	591 West Putnam Avenue	_ ⊐add
		Greenwich, CT 06830	_ ■Remove
AMBR	Brian Soss	591 West Putnam Avenue	_ □Add
		Greenwich. CT 06830	
Authorized Person	Jacob Berger	125 High Street, 27th Flor, High St. Tower	⊠Add
		Boston, MA 02110	
aforemention	certificate, if required: no more the damendment(s), duly authentical inder the daw of whitehing entity is facely burger.	led by the official having custody of records in the	
	Signati	ire of the authorized representative	

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Title/Capacity	<u>Name</u>	Address	Type of Action
Authorized Person	Hisham Kader	125 High Street, 27th Floor High Street Tower Boston, MA 02110	Add
Authorized Person	Jason M. Sweatt	125 High Street, 27th Floor High Street Tower Boston, MA 02110	Add
Authorized Person	Gregory E. Haas	125 High Street, 27th Floor High Street Tower Boston, MA 02110	Add