Division of Corporations

6/17 1251

M16000000874

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : GREENBERG TRAURIG (ORLANDO)
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Phone : (407)418-2435
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17 JUN 15 AM 11:13
DIVISION OF CORPORATIONS

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

Email Address: irvingh@gtlaw.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
5333 COLLINS UNIT 1, LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	$30.00

RECEIVED
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TALLAHASSEE, FLORIDA

Resubmittal w/ DE attachment

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JUN 16 2017
SIMMONS

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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: 5333 Collins Unit I, LLC

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) _____

_____

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17 JUN 15 AM 11:14
DIVISION OF CORPORATIONS

2. The Florida document number of this limited liability company is: M16000000874

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: February 2, 2016

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

5. New name of the limited liability company: 5333 Collins Unit Owner, 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: _____

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

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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:

_____

Title/ Capacity	Name	Address	Type of Action
_____	_____	_____	☐ Add
		_____	☐ Remove
_____	_____	_____	☐ Add
		_____	☐ Remove
_____	_____	_____	☐ Add
		_____	☐ Remove
_____	_____	_____	☐ Add
		_____	☐ Remove
_____	_____	_____	☐ Add
		_____	☐ 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

Christina Cuervo, Manager

Typed or printed name of signee

Filing Fee: $25.00

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Delaware

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 "5333 COLLINS UNIT I, LLC", CHANGING ITS NAME FROM "5333 COLLINS UNIT I, LLC" TO "5333 COLLINS UNIT OWNER, LLC", FILED IN THIS OFFICE ON THE EIGHTH DAY OF JUNE, A.D. 2017, AT 7:44 O'CLOCK P.M.

Jeffrey W. Bullock, Secretary of State

5943539 8100
SR# 20174670425

Authentication: 202697894
Date: 06-12-17

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

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State of Delaware
Secretary of State
Division of Corporations
Delivered 07:43 PM 06/08/2017
FILED 07:44 PM 06/08/2017
SR 20174670425 - File Number 5943539

STATE OF DELAWARE
CERTIFICATE OF AMENDMENT

1. Name of Limited Liability Company:

5333 COLLINS UNIT I, LLC

2. The Certificate of Formation of the limited liability company is hereby amended as follows:

Article FIRST is deleted in its entirety and replaced with the following:

"FIRST: The name of the limited liability company is

5333 COLLINS UNIT OWNER, LLC

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the 7th day of June , 2017.

/s/ Christina Cuervo
Christina Cuervo, Authorized Person

ORL 29957144Ov1