

***Please note this filing was previously rejected
please give this filing the date of original submittal of 12/22/2016
Thank you

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
M16000313425

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : CAPITOL SERVICES, INC.
Account Number : I20160000017
Phone : (800)345-4647
Fax Number : (800)432-3622

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

Email Address: alex.mclaughlin@sutherland.com

RECEIVED
2016 DEC 23 PM 1:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
NW/PSREG PRINCETON VENTURE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$55.00

16 DEC 22 AM 10:01
DIVISION OF CORPORATIONS
FILED

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NW/PSREG PRINCETON VENTURE, LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alexandra McLaughlin

Name of Person

SUTHERLAND

Firm/Company

999 Peachtree Street NE, Suite 2300

Address

Atlanta, GA 30309

City/State and Zip Code

alex.mclaughlin@sutherland.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Teresa Sharpley

Name of Person

at (800) 662-0171

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$30 Filing Fee &
Certificate of Status

\$55 Filing Fee &
Certified Copy

\$60 Filing Fee,
Certificate of Status &
Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANACT 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: NW/PSREG PRINCETON VENTURE, 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

2. The Florida document number of this limited liability company is: M16000001156

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: February 10, 2016

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

5. New name of the limited liability company: CRP/POLLACK COLLEGE PARK VENTURE, L.L.C.
(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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16 DEC 22 AM 10:01
OFFICE OF CLERK OF CIRCUIT COURT

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)(a), indicate that change:

Title/Capacity	Name	Address	Type of Action
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

DIVISION OF CORPORATE AFFAIRS
 16 DEC 22 AM 10:01
FILED

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.

[Handwritten Signature]

 Signature of the authorized representative

Marc S. Pollack, Authorized Representative

Typed or printed name of signer

Filing Fee: \$25.00

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "NW/PSREG PRINCETON VENTURE, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "CRP/POLLACK COLLEGE PARK VENTURE, L.L.C." ON THE TWENTY-FIRST DAY OF DECEMBER, A.D. 2016, AT 6:11 O'CLOCK P.M.



5942195 8320
SR# 20167245790

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

A handwritten signature in black ink, appearing to read "JWBULLOCK", written over a horizontal line.

Authentication: 203577526
Date: 12-23-16

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December 23, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

NW/PSREG PRINCETON VENTURE, LLC
C/O POLLACK SHORES REAL ESTATE GROUP, LL
ONE PREMIER PLAZA, 5606 GLENRIDGE DRIVE
ATLANTA, GA 30342US

SUBJECT: NW/PSREG PRINCETON VENTURE, LLC
REF: M16000001156

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

FAX Aud. #: H16000313425
Letter Number: 316A00027293