

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 : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 205-8842
Fax Number : (850) 878-5368

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

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MHC FOREST LAKE ESTATES RV, L.L.C.**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

MAY 23 2016

Electronic Filing Menu Corporate Filing Menu

Y. SULKER
Help

RECEIVED
2016 MAY 20 PM 1:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
16 MAY 20 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MHC Forest Lake Estates RV, L.L.C.

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:

JO FIGUEROA

Name of Person

EQUITY LIFESTYLE PROPERTIES, INC.

Firm/Company

TWO N. RIVERSIDE PLAZA, SUITE 800

Address

CHICAGO, IL 60606

City/State and Zip Code

JO_FIGUEROA@EQUITYLIFESTYLE.COM

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

For further information concerning this matter, please call:

JO_FIGUEROA@EQUITYLIFESTYLE.COM

at (312) 279-1670

Name of Person

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

CR2E055 (9/15)

**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: MHC Forest Lake Estates RV, L.L.C.

Enter new principal office address, if applicable: TWO N. RIVERSIDE PLAZA, SUITE 800

(Principal office address)
MUST BE A STREET ADDRESS

CHICAGO, IL 60606

Enter new mailing address, if applicable:

(Mailing address)
MAY BE A POST OFFICE BOX

TWO N. RIVERSIDE PLAZA, SUITE 800

CHICAGO, IL 60606

2. The Florida document number of this limited liability company is: M16000003812

3. Jurisdiction of its organization: DELAWARE

4. Date authorized to do business in Florida: MAY 13, 2016

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

5. New name of the limited liability company: MHC Forest Lake Village RV, 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

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:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<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

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CLARK COUNTY FLORIDA
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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

Paul Huff
Typed or printed name of signer

Filing Fee: \$25.00

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THAT THE SAID "MHC FOREST LAKE
ESTATES RV, L.L.C.", FILED A CERTIFICATE OF AMENDMENT, CHANGING
ITS NAME TO "MHC FOREST LAKE VILLAGE RV, L.L.C." ON THE
TWENTIETH DAY OF MAY, A.D. 2016, AT 9:58 O'CLOCK A.M.



6021726 8320
SR# 20163497904

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202355377
Date: 05-20-16