Page 3 of 7 Division of Corporations



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(((H160002182773)))



H160002182773ABC1

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page. Doing so will generate another cover sheet.	I

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone Fax Number : (850)205-8842 : (850)878-5368

**Enter	the	email	address	for	this	busine	ess	entity	to	be i	used	for	future
an	nual	report	t mailin	as.	Enter	only	one	email	add	ress	s ple	ase.	**

Email	Address:				

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DRIVE SHACK LAKE NONA LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

	istration S ision of C	Section orporations			
SUBJECT:	Drive Sh	ack Orlando LLC (f/k/a Drive	Shack Lake N	ona LLC)	
		Name of Foreign	Limited Lia	bility Comp	any
Dear Sir or	Madam:				
The enclose	d applicat	ion, certificate and fee(s) a	re submitted	for filing.	
Please return	n all corre	spondence concerning this	matter to the	e following:	
Helen Ong					
		Name of Person		_	
FIG LLC		•			
	-	Firm/Company			
1345 Avenue	of the Am	ericas			
		Address			
NY, NY USA	10105				
	-	City/State and Zip Code	 		
rlualhati@for	tress.com				
E-mail ad	dress: (to	he used for future annual r	eport notific	ation)	
For further is	nformatic	n concerning this matter, p	lease call:		
Helen Ong			at (798 6100	i
	Name	of Person		e & Daytim	e Telephone Number
Regi Divi Clift 2661	stration S sion of Co on Buildi Executiv	orporations		Registra Division P.O. Bo	and ADDRESS: ation Section of Corporations ox 6327 ssee, Florida 32314
Enctosed is : \$25 Filing CR2E055 (9/15)	g Fcc	or the following amount: \$\Bigciam \text{\$30 Filing Fee & Certificate of Status}\$		ing Fee & ed Copy	See Filing Fee, Certificate of Status & Certified Copy

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	ears on the records of the Florida Depart	ment of
State: Drive Shack Lake Nona LLC		
Enter new principal office address, if applicable		
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)		
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: M16000005025	in the second second
3. Jurisdiction of its organization: Delaware		ELIAN SEF
4. Date authorized to do business in Florida: Ju	ne 23, 2016	712, <u>1</u>
SECTION II (5-9 complete only the applicable	le changes)	
5. New name of the limited liability company: (m	Drive Shack Orlando LLC	<u> </u>
(m	ust contain "Limited Liability Company	/, ""L.L.C.,"grg"LL C. ")
(If name unavailable, enter alternate name adopt copy of the written consent of the managers or must contain "Limited Liability Company," "L.I	nanaging members adopting the alternat	es in Florida and attach a e name. The alternate name
6. If amending the registered agent and/or registered agent and/or the new registered office	ered officer address on our records, <u>ente</u> address here;	er the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
_	, I	Florida
New Registered Agent's Signature, if changing I hereby accept the appointment as registered at the provisions of all statutes relative to the prop and accept the obligations of my position as reg document is being filed to merely reflect a changliability company has been notified in writing of	Registered Agent: gent and agree to act in this capacity. I j er and complete performance of my dut istered agent as provided for in Chapter ge in the registered office address, I hen	further agree to comply with ies, and I am familiar with r 605, F.S. Or, if this

If Changing Registered Agent, Signature of New Registered Agent

3. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:						
tle/ Capacity	Name	∆ddress	Type of Action			
		Market spranger and the second	Add			
			Remove			
			Remove			
		,	Rcmove			
			Add			
			Remove			
			Add			
aforementioned am	icate, if required: no more than 90 tendment(s), duly authenticated by the law of which this entity is organ	the official having custody of recor	right. #			
	- X-1	the authorized representative	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			

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 "DRIVE SHACK LAKE NONA

LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO

"DRIVE SHACK ORLANDO LLC" ON THE TWENTY-NINTH DAY OF AUGUST,

A.D. 2016, AT 10:26 O'CLOCK A.M.

A DESTRUCTION OF THE PARTY OF T

Authentication: 202919949

Date: 08-31-16