

11/6/2020

Division of Corporations

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 : Vcorp SERVICES, LLC
Account Number : 120080000067
Phone : (845)425-0077
Fax Number : (845)818-3588

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

Email Address: _____

RECEIVED

2020 NOV -6 PM 1:18

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BRE PORTOFINO MF PROPERTY OWNER LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu Y **SULKEP** Help

NOV 09 2020

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: BRE PORTOFINO MF PROPERTY OWNER LLC

Enter new principal office address, if applicable: c/o Optimum Properties LLC

(Principal office address

MUST BE A STREET ADDRESS)

700 Central Avenue, Farmingdale, NJ 07727

Attention: Joseph Ehnman and Barry Shreiber

Enter new mailing address, if applicable:

(Mailing address

MAY BE A POST OFFICE BOX)

Aliro Apartments

14000 Biscayenne.. Attention - Leasing office

Miami, FL 33181

2. The Florida document number of this limited liability company is: M16000005103

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 06/24/2016

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

5. New name of the limited liability company: Aliro Reserve LLC

(must contain "Limited Liability Company," "LLC," or "LLCS")

(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," "LLC," or "LLCS.")

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: Vcorp Services, LLC

New Registered Office Address: 5011 South State Road 7, Suite 106

Enter Florida Street Address

Davie

Florida

33314

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.

[Signature]
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)(c), 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
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_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

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.

Eli Weingarden

Signature of the authorized representative

Eli Weingarden

Typed or printed name of signee

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 'BRE PORTOFINO MF PROPERTY OWNER LLC' FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO 'ALIRO RESERVE LLC', ON THE THIRTIETH DAY OF SEPTEMBER, A.D. 2020, AT 2:28 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID 'ALIRO RESERVE LLC', IS THE LAST KNOWN TITLE OF RECORD OF THE AFORESAID LIMITED LIABILITY COMPANY.



6075700 8321
SR# 20208265245

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

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

Authentication: 204025446
Date: 11-06-20