Division of Corporations

https://efile.sunbiz.org/scripts/efilcovr.cxe

Florida Department of State [Avision of Congorations] [Acttronic Filing Government]

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.

(((H17000098213.3)))



H170000982133ABC+

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

Fax Number

: (850)617-6383

: (561)694-1639

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC

Account Number : 110432003053 Phone : (561)694-8107

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

email	Address:	<u> </u>	
-------	----------	----------	--

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LITTLE ROAD DEVELOPMENT I, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$30.00

J. HARRIS

HIT APR 11 PH 4: 5

Electronic Filing Menu

Corporate Filing Menu

Help

1

850-617-6381

4/11/2017 1:57:52 PM PAGE 1/001 Fax Server



April 11, 2017

FLORIDA DEPARTMENT OF STATE

Division of Corporations

LITTLE ROAD DEVELOPMENT I, LLC 199 WEST ROAD, SUITE 101 PLEASANT VALLEY, NY 12569US

SUBJECT: LITTLE ROAD DEVELOPMENT I, LLC

REF: M16000007331

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 of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

NEED EITHER CERTIFIED COPY OF AMENDMENT FILED IN DELAWARE OR A CERTIFICATE LISTING BOTH OLD AND NEW NAMES

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.

Stacey M Warren Regulatory Specialist II FAX Aud. #: E17000098213 Letter Number: 617A00006965

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)

	lability Company as it appears t	•	Florida Department of	ĺ
State;	Little Road Development I	LLC		
Enter new principal	office eddress, if applicable:			<u> </u>
(Principal office add MUST BE A STREE				
Butter new mailing ac (Malling address MAX SE A POST O				
2. The Florida docum	– nent number of this limited liabl	lity company is:	M16000007331	
3. Indiediction of its	organization: Delaware			
	do business in Florida:S		16	
	emplete only the applicable ch			<u>-</u>
5. New name of the	limited liability company:(must c	1991 SW Hayv	vorth Avenue, LLC bility Company, ""L.L.C.," or	"ग्रद्ग
copy of the written or	enter alternate name adopted for passed of the managers of mana d Liability Cosopany," "L.L.C."	ging members adopt	nseating business in Florids en ling the citemate name. The alt	ी होतहती के भागमा कोमारा
6. If amending the re-	gistared agent and/or registered or the new registered of the add	officer address on o	ur records, <u>anter the name of t</u> i	io devi
Name of New Registr	red Americ			<u></u>
New Registered Offic	e Address:			
		ьт	er Florida Street Address	3
	·	City	, Florida	ode
I hereby accept the at the provisions of all a and accept the obliga- document is being file	e's Signature if changing Rogic opolitiment as registered agent i statutes relative in the proper an tions of my position as registered to merely reflect a change in been notified in writing of this	and agree to act in i id complete perform ed ageis as provides the registered office	icines of my duties, and I am for I for in Chapter 605, F.S. Or, t	mUlor Wilt Fehis

If Changing Registered Agent, Signature of New Registered Agent

3

3

g fje

8. If the amoundment,	hanges person, title or especity is	n accordance with 605,0902 (1)(6), inclinate tha	t change:
Ditic/Capacity	Name	Address	Type of Action
			Add
			Romew
		e de la companya de	Riemowa
, n			
			Ramovo
			_D Ad d
			Remove
-			Add
Attached is a certific	ata, if sequired: no more than 9	0 dava cild, evidencing the	Remove
eturementioned amo	ndment(s), duly authoriticated be lew of which this cettry is org	y the official having oustady of records in the	}
	Signatura	the district oppositioning	ļ

Filing Feet \$25.00

17 APR 11 AM 9:21

<u>Delaware</u>

Page 1

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 "LITTLE ROAD
DEVELOPMENT I, LLC", CHANGING ITS NAME FROM "LITTLE ROAD
DEVELOPMENT I, LLC" TO "1991 SW HAYWORTH AVENUE, LLC", FILED IN
THIS OFFICE ON THE TENTE DAY OF APRIL, A.D. 2017, AT 10:51
O'CLOCK A.M.

6150184 8100 SR# 20172429250

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

Janny & Ballet, Standary of Earl

Authentication: 202359811

Date: 04-11-17

J,

State of Delaware
Scoretary of State
Division of Corporations
Delivered 16:51 AM 04/10/2017
FUED 10:51 AM 04/10/2017
SR 20173379978 - FReNumber 6150184

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

Name of Limited Liability Company: Little Road Development I

The Limited Liability Company In order to accomplish the for of the Certificate of Formati- entirety and replaced with the the limited liability company 1991 SW Hayworth Avenue, LLC. N WITNESS WHEREOF, the undersigne the 10th day of April	regoing, Paragraph FIF on is deleted in its ofollowing: The name hereby formed is:
	d have executed this Certificate
he 10th day of April	A.D. 2017
Ву:	Authorized Person(s)
, man-1	,,
Name: D	exia Dargaty Print or Type