

M17000002601

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 : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561) 694-8107
Fax Number : (561) 694-1639

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
AMFP III SHERWOOD FOREST LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$60.00

RECEIVED
19 AUG 16 PM 1:17
SECRETARY OF STATE
TALLAHASSEE, FL

FILED
19 AUG 16 AM 12:27
TALLAHASSEE, FL

K. SALY

AUG 19 2019

8/14/19, 11:55 AM

850-617-6381

8/16/2019 12:51:45 PM PAGE 1/001 Fax Server



August 16, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

AMFP III SHERWOOD FOREST LLC
420 LEXINGTON AVE, STE. 2821
NEW YORK, NY 10170US

SUBJECT: AMFP III SHERWOOD FOREST LLC
REF: M17000002601

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.

You failed to make the correction(s) requested in our previous letter.

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.

Karen A Saly
Regulatory Specialist II

FAX Aud. #: H19000242272
Letter Number: 919A00016969

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: AMFP III SHERWOOD FOREST LLC

Enter new principal office address, if applicable:

(Principal office address)
MUST BE A STREET ADDRESS

1314 E. Las Olas Blvd., #1111

Ft. Lauderdale, FL 33301

Enter new mailing address, if applicable:

(Mailing address)
MAY BE A POST OFFICE BOX

1314 E. Las Olas Blvd., #1111

Ft. Lauderdale, FL 33301

2. The Florida document number of this limited liability company is: M17000002601

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 3/27/17

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

5. New name of the limited liability company: Ortsac Sherwood Property Owner, LLC
(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: Robert T. Castro

New Registered Office Address: 1314 E. Las Olas Blvd., #1111

Enter Florida Street Address

Ft. Lauderdale

33301

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, 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)(c), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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<u>P</u>	<u>Benjamin L. Friedman</u>	<u>Abacus Capital Group, 420 Lexington Ave.</u> <u>Suite 2821, New York, NY 10170</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
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<u>MGR</u>	<u>Robert T. Castro</u>	<u>1314 E. Las Olas Blvd., #1111</u> <u>Ft. Lauderdale, FL 33301</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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<u>MGR</u>	<u>Sofia C. Castro</u>	<u>1314 E. Las Olas Blvd., #1111</u> <u>Ft. Lauderdale, FL 33301</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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<u></u>	<u></u>	<u></u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove
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<u></u>	<u></u>	<u></u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove
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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

Robert T. Castro

Typed or printed name of signee

Filing Fee: \$25.00

FILED
19 AUG 16 AM 12:28
TALLAHASSEE, FLORIDA

Delaware

The First State

Page 1

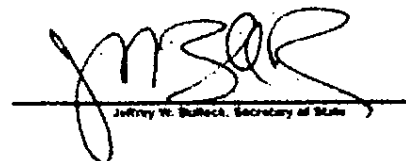
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ORTSAC SHERWOOD PROPERTY OWNER, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTEENTH DAY OF AUGUST, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ORTSAC SHERWOOD PROPERTY OWNER, LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF MARCH, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

FILED
19 AUG 16 AM 12:28
DELAWARE




Jeffrey W. Bullock, Secretary of State

6356391 8300

SR# 20196541759

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

Authentication: 203417472

Date: 08-15-19

Delaware

The First State

Page 1

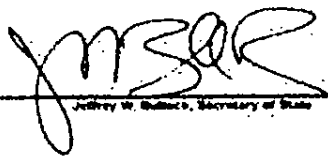
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "AMFP III SHERWOOD FOREST LLC", CHANGING ITS NAME FROM "AMFP III SHERWOOD FOREST LLC" TO "ORTSAC SHERWOOD PROPERTY OWNER, LLC", FILED IN THIS OFFICE ON THE SIXTH DAY OF AUGUST, A.D. 2019, AT 1:54 O'CLOCK P.M.

FILED
19 AUG 16 AM 12:28
DELAWARE



6356391 8100
SR# 20196560249

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


Jeffrey W. Bullock, Secretary of State

Authentication: 203423089
Date: 08-16-19

State of Delaware
Secretary of State
Division of Corporations
Delivered 01:54 PM 08/06/2019
FILED 01:54 PM 08/06/2019
SR 20196364452 - File Number 6356391

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

FILED
19 AUG 16 AM 12:28
DELAWARE SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Liability Company: AMFP III Sherwood Forest LLC
2. The Certificate of Formation of the limited liability company is hereby amended as follows:

The above-mentioned named entity, AMFP III Sherwood Forest LLC, shall be changed to the following named entity: Ortsac Sherwood Property Owner, LLC

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the 6th day of August, A.D. 2019.

By: 

Authorized Person(s)

Name: Gregory Lyden

Print or Type