

7/17/2017

Division of Corporations
 Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

M17000004204

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.

((H170001866103)))



H170001866103ABC/

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 : (850)617-6383

From:
 Account Name : C T CORPORATION SYSTEM
 Account Number : FCA000000023
 Phone : (512)418-6949
 Fax Number : (954)208-0845

****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
 LEGACY MOSS LANDING, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$55.00

RECEIVED

2017 JUL 17 PM 8:45

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILED
 17 JUL 17 AM 8:59
 DIVISION OF CORPORATIONS

Electronic Filing Menu

Corporate Filing Menu

Help

O. SIMMONS
 JUL 18 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LEGACYMOSSLANDING,LLC
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:

Kelly Arrigo

Name of Person

PGIMRealEstate

Firm/Company

7Giraldafarms

Address

Madison,NJ07940

City/State and Zip Code

kelly.arrigo@pgim.com

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

For further information concerning this matter, please call:

Kelly Arrigo

at (973) 683-1638

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

CR2F055 (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: Legacy Moss Landing, LLC

Enter new principal office address, if applicable: 7GiraldaFarms

(Principal office address

MUST BE A STREET ADDRESS)

Madison, NJ 07940

Enter new mailing address, if applicable:

(Mailing address

MAY BE A POST OFFICE BOX)

c/oPGIMRealEstate

7GiraldaFarms

Madison, NJ 07940

2. The Florida document number of this limited liability company is: M17000004204

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: May 17, 2017

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

5. New name of the limited liability company: _____
(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: CTCorporationSystem

New Registered Office Address: 1200SouthPineIslandRond

Enter Florida Street Address

Plantation

17

Florida

33324

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.

AgnesBroszczak, Asst. Secretary

Agnes B.

If Changing Registered Agent, Signature of New Registered Agent

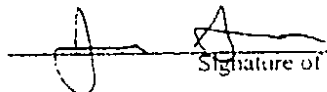
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

The limited liability company shall be managed by its member.

<u>Title/Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Manager	Legacy Moss Landing Manager, LLC	8137 N 8th Street	<input type="checkbox"/> Add
		Paradise Valley, AZ 85253	<input checked="" type="checkbox"/> Remove
Member	PR III/Legacy MHC Holdings, LLC	7 Giralda Farms	<input checked="" type="checkbox"/> Add
		Madison, NJ 07940	<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

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

Jordan Smith

Typed or printed name of signee

Filing Fee: \$25.00

FILED

17 JUL 17 AM 8:59
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