

M17 00000 6105

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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AND  
FILED  
2019 MAR 26 PM 3:56  
SECRETARY OF STATE  
TALLAHASSEE, FL 09177

T.G.  
04/05/19

# COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 908 - Scannell (Tallahassee), 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:

Joy Jackson  
Name of Person

Scannell Properties  
Firm/Company

8801 River Crossing Blvd., Ste. 300  
Address

Indianapolis, IN 46240  
City/State and Zip Code

joyj@scannellproperties.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joy Jackson at (317) 218-1650  
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

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**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

# 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: 908 - Scannell (Tallahassee), LLC

Enter new principal office address, if applicable: \_\_\_\_\_

(Principal office address  
MUST BE A STREET ADDRESS)

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: M17000006105

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 07/19/2017

## 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: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

*Enter Florida Street Address*

\_\_\_\_\_, 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, I hereby confirm that the limited liability company has been notified in writing of this change.*

\_\_\_\_\_  
If Changing Registered Agent, Signature of New Registered Agent

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 TALLAHASSEE, FLORIDA

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

\_\_\_\_\_

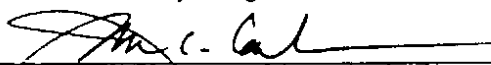
8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

\_\_\_\_\_

| <u>Title/ Capacity</u> | <u>Name</u>                   | <u>Address</u>                             | <u>Type of Action</u>                      |
|------------------------|-------------------------------|--|--|
| <u>MGR</u>             | <u>Robert J. Scannell</u>     | <u>8801 River Crossing Blvd., Ste. 300</u> | <input type="checkbox"/> Add               |
|                        |                               | <u>Indianapolis, IN 46240</u>              | <input checked="" type="checkbox"/> Remove |
| <u>MGR</u>             | <u>Douglas L. Snyder</u>      | <u>8801 River Crossing Blvd., Ste. 300</u> | <input type="checkbox"/> Add               |
|                        |                               | <u>Indianapolis, IN 46240</u>              | <input checked="" type="checkbox"/> Remove |
| <u>MGR</u>             | <u>908 Group Manager, LLC</u> | <u>2209 E. 7th Avenue, Suite C</u>         | <input checked="" type="checkbox"/> Add    |
|                        |                               | <u>Tampa, FL 33605</u>                     | <input type="checkbox"/> Remove            |
|                        |                               | _____                                      | <input type="checkbox"/> Add               |
|                        |                               | _____                                      | <input checked="" type="checkbox"/> Remove |
|                        |                               | _____                                      | <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  
**James C. Carlino**  
 \_\_\_\_\_  
 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 "908 - SCANNELL (TALLAHASSEE), 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 TWENTIETH DAY OF MARCH, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "908 - SCANNELL (TALLAHASSEE), LLC" WAS FORMED ON THE SEVENTEENTH DAY OF JULY, A.D. 2017.

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

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AND  
FILED  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



  
Jeffrey W. Bullock, Secretary of State

6481328 8300

SR# 20192138628

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 202482032

Date: 03-20-19