Division of Corporations Electronic Filing Cover Sheet

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AG-AP 12TH AVENUE OWNER LLC

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Electronic Filing Menu

Corporate Filing Menu

Help

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)

. Name of limited liability Company as it appears on the records on the Florida Department of	
State: AG-AP 12th Avenue Owner LLC	
inter 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: M17000008657	1.7
(The Florida document manner of this influed habitity company to	8
3. Jurisdiction of its organization: Delaware	
4. Date authorized to do business in Florida: 10/09/2017	
CVCTION II (5.9 complete only the applicable changes)	
AGAP Homestead LLC	Χ.
Date authorized to do business in Florida: 10/09/2017 SECTION II (5-9 complete only the applicable changes) AGAP Homestead LLC (must contain "Limited-Liability Company: "L.L.C.," or FLC.	ວ
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written cousent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LI.C.")	ne
 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 Revistered Office Address: Enter Florida Street Address	
City , Florida 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 limit liability company has been notified in writing of this change.	
If Changing Registered Agent, Signature of New Registered Agent	<u>t</u>

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8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:						
Title/ Capacity	Name	Address	Type of Action			
* ***********		2.1	Add			
			Remove			
nyamanandan barki 44			Add			
			Remove			
			Remove			
			Reffiore			
	27824-42		Add			
eforementio	a certificate, if required: no more than 90 med amendment(s), duly authenticated by under the law of which this entity is organized. Signature of Nader Pakrar, Authorized Perse	the official having customy of fectinized. the authorized representative	Remove			

Piling Fee: \$25.00



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "AG-AP 12TH AVENUE OWNER LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "AGAP HOMESTEAD LLC" ON THE SIXTH DAY OF OCTOBER, A.D. 2017, AT 10 O'CLOCK P.M.



Authentication: 203381701

Date: 10-11-17

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