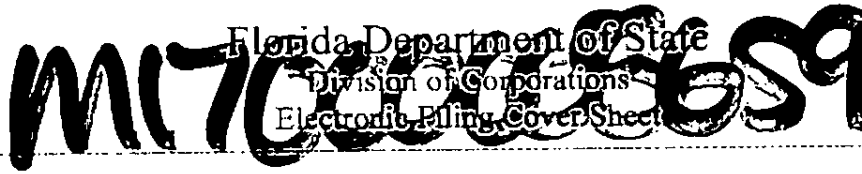


10/11/2017

Division of Corporations



**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.

(((H17000268150 3)))



H170002681503ABC/

**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**  
**AG-AP PEMBROKE OWNER LLC**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 04      |
| Estimated Charge      | \$25.00 |

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Corporate Filing Menu

Help

2017 OCT 11 PM 4: 30

2017 OCT 11 P 1: 28

FILED

TALLAHASSEE, FLORIDA

TALLAHASSEE, FLORIDA

# 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: AG-AP Pembroke Owner 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: M17000008659

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 10/09/2017

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

5. New name of the limited liability company: AGAP Hollywood 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: \_\_\_\_\_

New Registered 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 limited liability company has been notified in writing of this change.*

If Changing Registered Agent, Signature of New Registered Agent

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2017 OCT 11 PM 1:11  
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CLERK OF CIRCUIT COURT  
JACKSONVILLE, FLORIDA

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>           |
|-----------------------|-------------|----------------|---------------------------------|
|                       |             |                | <input type="checkbox"/> Add    |
|                       |             |                | <input type="checkbox"/> Remove |
|                       |             |                | <input type="checkbox"/> Add    |
|                       |             |                | <input type="checkbox"/> Remove |
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|                       |             |                | <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  
 Nader Pakfar, Authorized Person  
 Typed or printed name of signee

Filing Fee: \$25.00

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 2017 OCT 11 PM 1:28  
 TALLAHASSEE, FLORIDA  
 CLERK OF CIRCUIT COURT

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY THAT THE SAID "AG-AP PEMBROKE OWNER  
LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO  
"AGAP HOLLYWOOD LLC" ON THE SIXTH DAY OF OCTOBER, A.D. 2017, AT  
9:54 O'CLOCK P.M.

FILED  
2017 OCT 11 P 1:29  
DELAWARE SECRETARY OF STATE



6569375 8320  
SR# 20176575070

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

  
Jeffrey W. Bullock, Secretary of State

Authentication: 203381715  
Date: 10-11-17