

3/22/2018

2018-03-22 11:08:47 CST

19542080845 From: Ranae McGraw

M1700009226

Division of Corporations

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

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.

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
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
3575 AVIATION DRIVE LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

RECEIVED**2018 MAR 22 PM 12:31**DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDASTATE OF FLORIDA
TALLAHASSEE**2018 MAR 22 A 10:09****FILED**

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**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: 3575 Aviation Drive LLC

Enter new principal office address, if applicable: 1020 Lehigh Station Road

(Principal office address
MUST BE A STREET ADDRESS)

Henrietta, NY 14467

Enter new mailing address, if applicable:

(Mailing address
MAY BE A POST OFFICE BOX)

1020 Lehigh Station Road

Henrietta, NY 14467

2. The Florida document number of this limited liability company is: M17000009228

3. Jurisdiction of its organization: New York

4. Date authorized to do business in Florida: October 27, 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: Central Florida Development LLC

New Registered Office Address: 300 Eagles Landing Drive

Enter Florida Street Address

Lakeland, Florida 33810
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.

[Signature]
If Changing Registered Agent, Signature of New Registered Agent

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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)(c), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Member	LeFrois Associates, LP	1020 Lehigh Station Road, Henrietta, NY 14467	<input checked="" type="checkbox"/> Add
		Old Republic Exchange Company 500 Ygnacio Valley Rd., Ste 180 c/o Old Republic Exchange Co. Walnut Creek, CA 94596	<input checked="" 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
			<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.

Stacy Briggs
Signature of the authorized representative

Stacy Briggs, Authorized Person

Typed or printed name of signee

Filing Fee: \$25.00