

Florida Department of State
 Division of Corporations
 Elections & Public Safety
 Tallahassee, Florida

MI 800000420

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 : MCCARTHY, SUMMERS, WOOD, NORMAN, MELBY & SCHEIDT, P.A.
 Account Number : I19990000170
 Phone : (772)286-1700
 Fax Number : (772)283-1803

2022 DEC 12 AM 11:45
 SECRETARY OF STATE
 TALLAHASSEE, FL

FILED

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: CWILKES@outlookholdings.net

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
 BAY TREE LODGE LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

C. BRUMBLEY
 DEC 13 2022

2022 Dec 12 PM 4:16

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BAY TREE LODGE 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:

Corbin M. Wilkes
Name of Person

Outlook, Inc.
Firm/Company

1717 K Street, N.W. Suite 900
Address

Washington, DC 20006
City/State and Zip Code

cwilkes@outlookholdings.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christen Spake at (772) 286-1700
Name of Person Area Code & Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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)

2022 DEC 12 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

1. Name of limited liability Company as it appears on the records of the Florida Department of State: BAY TREE LODGE LLC

Enter new principal office address, if applicable: 151 South River Road
Sewalls Point, Florida 34996
(Principal office address
MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: 151 South River Road LLC, c/o Outlook, Inc.
(Mailing address
MAY BE A POST OFFICE BOX)
1717 K Street, NW, Suite 900
Washington, DC 20006

2. The Florida document number of this limited liability company is: M18000000420

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 01/16/2018

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

5. New name of the limited liability company: 151 South River Road 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: n/a

New Registered Office Address: n/a
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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7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction.

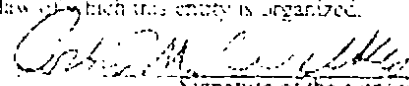
as _____

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

as _____

<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
_____	_____	_____	<input type="checkbox"/> Add
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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

Corbin M. Wilkes, as Authorized Person

Typed or printed name of signee

Filing Fee: \$25.00

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State of Delaware
Secretary of State
Division of Corporations
Delivered 12:23 PM 11/30/2022
FILED 12:23 PM 11/30/2022
SR 20224134425 - File Number 6695913

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

1. Name of Limited Liability Company: BAY TREE LODGE LLC

2. The Certificate of Formation of the limited liability company is hereby amended as follows:

Change name to 151 South River Road LLC

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the 30th day of November, A.D. 2022.

By: Corbin M. Wilken
Authorized Person(s)

Name: Corbin M. Wilken
Print or Type