

Division of Corporations

M18000002881

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.

((H180001134683))



H180001134683ABC%

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) 617-6282

From: Account Name : JAM MARK LIMITED
Account Number : 120000000112
Phone : (305) 789-7758
Fax Number : (305) 789-7799

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

Email Address: allison.lehn@hklaw.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BIRD GROUP LUDVEST, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$55.00

RECEIVED
2018 APR 10 PM 4:23
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu Help

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 APR 10 AM 6:52

B FIGUEROA

APR 10 2018

((H18000113468 3))

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: BIRD GROUP LUDVEST, LLC

Enter new principal office address, if applicable:

(Principal office address) MUST BE A STREET ADDRESS

1515 S. Federal Hwy, Suite 300

Boca Raton, FL 33432

Enter new mailing address, if applicable:

(Mailing address) MAY BE A POST OFFICE BOX

1515 S. Federal Hwy, Suite 300

Boca Raton, FL 33432

2. The Florida document number of this limited liability company is: M18000002881

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: March 23, 2018

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

5. New name of the limited liability company: Altis Ludlam - Miami Capital, 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

((H18000113468 3))

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

10 APR 10 AM 6:52

((H18000113468 3))

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>
_____	_____	_____	<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.

~~_____~~
Signature of the authorized representative

Ricardo Caporal

Typed or printed name of signee

Filing Fee: \$25.00

((H18000113468 3))

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 APR 10 AM 6:52

((H18000113468 3))

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "BIRD GROUP LUDVEST, LLC", CHANGING ITS NAME FROM "BIRD GROUP LUDVEST, LLC" TO "ALTIS LUDLAM - MIAMI CAPITAL, LLC", FILED IN THIS OFFICE ON THE NINTH DAY OF APRIL, A.D. 2018, AT 10:29 O`CLOCK A.M.



Jeffrey W. Bullock
Jeffrey W. Bullock, Secretary of State

6810513 8100
SR# 20182523256

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202474530
Date: 04-09-18

((H18000113468 3))

(((H18000113468 3)))

State of Delaware
Secretary of State
Division of Corporations
Delivered 10:29 AM 04/09/2018
FILED 10:29 AM 04/09/2018
SR 20182523256 - File Number 6810513


**CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF FORMATION
OF
BIRD GROUP LUDVEST, LLC**

1. The name of the limited liability company is Bird Group Ludvest, LLC (the "Company").

2. The Certificate of Formation of the Company is hereby amended by deleting in its entirety Article 1 of the Certificate of Formation and substituting it to read as follows:

"FIRST: The name of the limited liability company is Altis Ludiam - Miami Capital, LLC."

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Amendment on this 9th day of April, 2018.



Ricardo Caporal, Authorized Person

(((H18000113468 3)))