M18060004085

(Requestor's Name)	
(Address)	
(Address)	<u></u>
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer	

Office Use Only



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2024 FEB 19 AM 9: 07

PER OF LUCY ON THE SO

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

_ CORPORATE

ACCOUNT NO. : I20000000195

REFERENCE : 323586 8331866

AUTHORIZATION :

COST LIMIT : \$ 25700

ORDER DATE : February 16, 2024

ORDER TIME : 8:0 AM

ORDER NO. : 323586-320

CUSTOMER NO: 8331866

FOREIGN FILINGS

NAME: GPT MERCY DRIVE OWNER LLC

EXAMINER:

LIMITED PARTNERSHIP

XX LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Shauna Godbolt -- EXT#

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	s on the records of the Florida Departme	nt of
State: GPT Mercy Drive Owner LLC		
Enter new principal office address, if applicable:	602 W. Office Center Drive, Suite 200	0
(Principal office address MUST BE A STREET ADDRESS)	Fort Washington, PA 19034	- 20
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2024 FEB 19 AM 9: 07
2. The Florida document number of this limited lia	bility company is: M18000004085	
Jurisdiction of its organization: Delaware		
4. Date authorized to do business in Florida: 04/2	6/2018	
SECTION II (5-9 complete only the applicable of		
	t contain "Limited Liability Company."	
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or mar must contain "Limited Liability Company," "L.L.C	naging members adopting the alternate n	n Florida and attach a ame. The alternate name
6. If amending the registered agent and/or registere registered agent and/or the new registered office ad	ed officer address on our records, <u>enter the</u> ddress here:	ne name of the new
Name of New Registered Agent:		·
New Registered Office Address:	Enter Florida Street A	(J. January
	City Flor	rida Zip Code
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agen the provisions of all statutes relative to the proper of and accept the obligations of my position as registed document is being filed to merely reflect a change is liability company has been notified in writing of the	nt and agree to act in this capacity. I furt and complete performance of my duties, ered agent as provided for in Chapter 60 in the registered office address, I hereby	and I am familiar with 5, F.S. Or, if this

Title/ Capacity	<u>Name</u>	Address	Type of Action
Managing Director	Warren "Wes" Vaughan Jr.	602 W. Office Center Drive, Suite 200 Fort Washington, PA 19034	≣ Add
			□Remove
			FEB 1
			S SSS ₽ ¶
			□Remove
			□Add
			□Remove
		·	□Add
			□p
aforemention	a certificate, if required: no more than 9 ned amendment(s), duly authenticated bunder the law of which this entity is org	by the official having custody of records in the	□Remove
	/s/ Alexa Rose	of the authorized representative	

Filing Fee: \$25.00