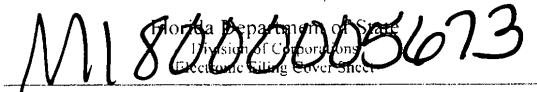
8/6/2018

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.

(((H18000228002 3)))



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 : (614)280-3338 Phone Fax Number : (954)208-0845

**Enter the email address for this business entity to be used for future $\overline{\infty}$ annual report mailings. Enter only one email address please.

Email Address:____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGNED. FORTUNA PROPERTIES INTERNATIONAL LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

. U

Electronic Filing Menu Corporate Filing Menu

Help

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	ears on the records of the Florida Department of
State: Fortuna Properties International ELC	
Enter new principal office address, if applicable	e:
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ED 838
2. The Florida document number of this limited	liability company is: M18000005673
3. Jurisdiction of its organization: Delaware	
4. Date authorized to do business in Florida: _	
SECTION II (5-9 complete only the applicab	de changes)
5. New name of the limited liability company: {n	nust contain "Limited Liability Company, " "L.L.C.," or "L.E.C.")
	nted for the purpose of transacting business in Florida and attach a managing members adopting the alternate name. The alternate name L.C." or "LLC.")
6. If amending the registered agent and/or registered agent and/or the new registered office	tered officer address on our records, enter the name of the new e address here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida Street Address
-	, Florida
the provisions of all statutes relative to the proj and accept the obligations of my position as reg	igent and agree to act in this capacity. I further agree to comply with per and complete performance of my duties, and I am familiar with gistered agent as provided for in Chapter 605, F.S. Or, if this age in the registered office address, I hereby confirm that the limited
 -	f Changing Registered Agent, Signature of New Registered Agent

Type of Action

∐Add

Remove

∐Add

Remove

___ Add

Remove

∏ Add

Remove

То	Page 4 of 4	2018-08-06 07 37 44 CST		161445548
	7. If the amer	nendment changes the jurisdiction of organization, indicate new jurisdiction: lendment changes person, title or capacity in accordance with 605,0902 (1)(e), indicate that change		
	8. If the amen			
	Tirle/ Capacity	. Name	Address	Type of
	MGR	Charles Nathan	200 S. Biscayne Blvd. Suite 2500	
			Miami, FL 33131	<u>~</u> & 🛭
				No. No.
			<u> </u>	
			·	F
				A

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duty authenticated by involticial having custody of records in the jurisdiction under the law of which this entity is organized.

Signature of the authorized representative

Arianne Plasencia

Typed or printed name of signee

Filing Fee: \$25.00