

M1900000SIS3

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

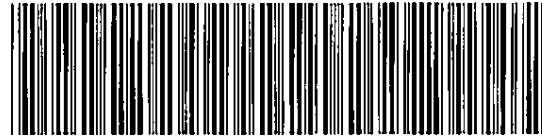
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700331100507

FILED

2018 JUN 27 A 3:35

CA, Filing Office

RECEIVED

19 JUN 27 AM 11:10

D SCOTT

JUN 28 2019

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 819490 4330802

AUTHORIZATION :

COST LIMIT : \$ 60.00

ORDER DATE : June 24, 2019

ORDER TIME : 10:04 AM

ORDER NO. : 819490-015

CUSTOMER NO: 4330802

FILED
2019 JUN 27 A 3:35

FOREIGN FILINGS

NAME: UNIVERSITY MALL RESI LLC

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☒ CERTIFIED COPY
☐ PLAIN STAMPED COPY
☒ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lydia Cohen -- EXT#

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: University Mall Resi 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:

Barbara Silberberg

Name of Person

c/o RD Management LLC

Firm/Company

810 Seventh Ave., 10th Floor

Address

New York, NY 10019

City/State and Zip Code

stanzer@rdmanagement.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Barbara Silberberg at (212) 265-6600, ext 278

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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

FILED
2010 JUN 27 A 3:35
TALLAHASSEE, FLA.

**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: University Mall Resi LLC

Enter new principal office address, if applicable: _____

(Principal office address

MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: _____

(Mailing address

MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M19000005153

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 05/24/19

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

5. New name of the limited liability company: University Mall TIC Resi 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

_____, 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

FILED

2019 JUN 27 A 3:35

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
-------	-------	-------	---------------------------------

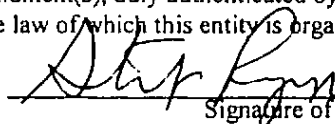
_____	_____	_____	<input type="checkbox"/> Add
-------	-------	-------	------------------------------

_____	_____	_____	<input type="checkbox"/> Remove
-------	-------	-------	---------------------------------

_____	_____	_____	<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

Stuart Rappaport, Esq.

Typed or printed name of signee

Typed or printed name of signee

Filing Fee: \$25.00

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "UNIVERSITY MALL TIC RESI LLC" IS DULY
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE TWENTIETH DAY OF JUNE, A.D. 2019.

FILED

2019 JUN 27 A 3:37

DELAWARE SECRETARY OF STATE



7422991 8300

SR# 20195494271

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


Jeffrey W. Bullock, Secretary of State

Authentication: 203066124

Date: 06-20-19

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 "UNIVERSITY MALL RESI
LLC", CHANGING ITS NAME FROM "UNIVERSITY MALL RESI LLC" TO
"UNIVERSITY MALL TIC RESI LLC", FILED IN THIS OFFICE ON THE
EIGHTEENTH DAY OF JUNE, A.D. 2019, AT 9 O'CLOCK A.M.

FILED
2019 JUN 27 A 3:15
J. BULLOCK, SECRETARY




Jeffrey W. Bullock, Secretary of State

7422991 8100
SR# 20195664505

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

Authentication: 203102781
Date: 06-26-19

State of Delaware
Secretary of State
Division of Corporations
Delivered 09:00 AM 06/18/2019
FILED 09:00 AM 06/18/2019
SR 20195494271 - File Number 7422991

STATE OF DELAWARE
CERTIFICATE OF AMENDMENT
OF
University Mall Resi LLC

FIRST: The name of the Limited Liability Company is University Mall Resi LLC.

SECOND: The Certificate of Formation of the Limited liability Company is hereby amended as follows:

The text of Article FIRST of the Certificate of Formation is hereby deleted in its entirety and the following inserted in its place:

The name of the limited liability company (hereinafter called the "limited liability company") is University Mall TIC Resi LLC.

IN WITNESS WHEREOF, the membership has caused this certificate to be signed by Steven Z. Nachman, Esq., an Authorized Person, this 11th day of June, 2019.

/s/ Steven Z. Nachman
Steven Z. Nachman, Authorized Person

FILED
JUN 18 2019
A 3:35
DELAWARE SECRETARY OF STATE