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To:

Division of Corporations  
Fax Number : (561) 617-6383

From:

Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.  
Account Number : 072720000036  
Phone : (407) 843-4600  
Fax Number : (407) 843-4444  
*Att: Tami Passley*

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

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
FOUNDRY GEAR MIAMI I DEVELOPER, LLC**

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

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# 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: Foundry Gear Miami I Developer, LLC

Enter new principal office address, if applicable: n/a

(Principal office address  
MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: n/a

(Mailing address  
MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M19000005674

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: June 10, 2019

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

5. New name of the limited liability company: Foundry Miami I Developer, LLC  
(must contain "Limited Liability Company," "LLC," or "L.L.C.")

(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," "LLC," or "L.L.C.")

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: 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

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

n/a

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

<u>Title/Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>P</u>	<u>Pryse R. Elam</u>	<u>420 S. Orange Avenue, Suite 950, Orlando FL 32801</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>VP</u>	<u>Paul B. Ellis</u>	<u>420 S. Orange Avenue, Suite 950, Orlando FL 32801</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>VP</u>	<u>Scott Renaud</u>	<u>420 S. Orange Avenue, Suite 950, Orlando FL 32801</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>ST</u>	<u>Kevin R. Maddron</u>	<u>420 S. Orange Avenue, Suite 950, Orlando FL 32801</u>	<input checked="" 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

Joaquin E. Martinez

Typed or printed name of signer

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 THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "FOUNDRY GEAR MIAMI I DEVELOPER, LLC", CHANGING ITS NAME FROM "FOUNDRY GEAR MIAMI I DEVELOPER, LLC" TO "FOUNDRY MIAMI I DEVELOPER, LLC", FILED IN THIS OFFICE ON THE FIFTH DAY OF SEPTEMBER, A.D. 2019, AT 3:46 O'CLOCK P.M.



A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

7451916 8100  
SR# 20196889782

Authentication: 203556322  
Date: 09-09-19

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

**STATE OF DELAWARE  
CERTIFICATE OF AMENDMENT  
TO CERTIFICATE OF FORMATION  
OF FOUNDRY GEAR MIAMI I DEVELOPER, LLC**

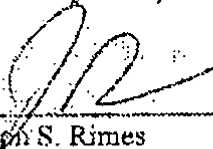
1. The name of the limited liability company is Foundry Gear Miami I Developer, LLC (the "Company").

2. Article FIRST of the Certificate of Formation of the Company, filed on June 4, 2019, in the Office of the Secretary of State of the State of Delaware, is hereby amended as follows:

FIRST. The name of the Company is:

FOUNDRY MIAMI I DEVELOPER, LLC

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Amendment to Certificate of Formation on this 5th day of September, 2019.

By:   
Name: Jason S. Rimes  
Title: Authorized Signatory