

M19000005851

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : CAPITOL SERVICES, INC.
Account Number : I20160000017
Phone : (855) 498-5500
Fax Number : (800) 432-3622

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

Email Address: _____

2020 OCT 19 PM 3:00
FILED

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LENDLEASE TOWERS III LLC

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$25.00

RECEIVED

2020 OCT 19 PM 2:32

V. SUI KEP

OCT 20 2020

**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: LENDLEASE TOWERS III LLC

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

(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: M19000005851

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: June 14, 2019

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

5. New name of the limited liability company: PARALLEL TOWERS III 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: n/a

New Registered Office Address: n/o

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

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

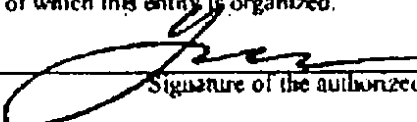
n/a

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

n/a

<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
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_____	_____	_____	<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
Yannis Macheras

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 "LENDLEASE TOWERS III LLC", CHANGING ITS NAME FROM "LENDLEASE TOWERS III LLC" TO "PARALLEL TOWERS III LLC", FILED IN THIS OFFICE ON THE FIFTEENTH DAY OF OCTOBER, A.D. 2020, AT 12:29 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.

7248234 8100
SR# 20207892444

You may verify this certificate online at corp.delaware.gov/auth:ver.shtml

Authentication: 203886995
Date: 10-19-20

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State of Delaware
Secretary of State
Division of Corporations
Delivered 12:29 PM 10/15/2020
FILED 12:29 PM 10/15/2020
SR 20207845661 - File Number 7248234

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

1. Name of Limited Liability Company: LENDLEASE TOWERS III LLC

2. The Certificate of Formation of the limited liability company is hereby amended as follows:

The name of the limited liability company hereafter shall be:

PARALLEL TOWERS III LLC

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the 15th day of October, A.D. 2020.

By:


Authorized Person(s)

Name: Yannis Macheras

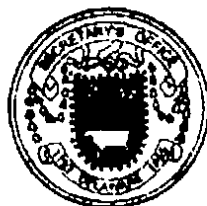
Print or Type

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "LENDLEASE TOWERS III LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "PARALLEL TOWERS III LLC" ON THE FIFTEENTH DAY OF OCTOBER, A.D. 2020, AT 12:29 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.

7248234 8320
SR# 20207892496

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Authentication: 203887008
Date: 10-19-20