Division of Corporations



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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DEANCURT WINTER PARK III LLC

Certificate of Status	0
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MAR 1 9 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 appear	s on the records of the Florida Department of		
State: Deancurt Winter Park III LLC		<del></del>	
Enter new principal office address, if applicable	380 Union Street, Suite 300		
(Principal office address	West Springfield, MA 01089	203	
MUST BE A STREET ADDRESS)		2020 HAR	
		R 18	
Enter new mailing address, if applicable:			
(Mailing oddress MAY BE A POST OFFICE BOX)	380 Union Street, Suite 300	PH	
MAT BE A FUST OF FICE BUAY	West Springfield, MA 01089		
		<del></del>	
2. The Florida document number of this limited lin	ability company is:		
3. Jurisdiction of its organization: Delaware			
4. Date authorized to do business in Florida: Aug	gust 23, 2019	<del></del>	
SECTION II (5-9 complete only the applicable			
g	oste Vue LLC st contain "Limited Liability Company, " "L.L.C	" or #11(C")	
(mus	st contain "Limited Liability Company, C.L.C.	,, or 151.6. )	
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or manust contain "Limited Liability Company," "L.L.	anaging members adopting the antimate name. The	da and attach a he alternate name	
6. If amending the registered agent and/or registered agent and/or the new registered office a	red officer address on our records, enter the marne address here:	of the new	
Name of New Registered Agent:		<u></u>	
New Registered Office Address:	Enter Florida Street Address	<del></del>	
	_, Florida		
	City	Zip Code	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered age the provisions of all statutes relative to the proper and accept the obligations of my position as regist document is being filed to merely reflect a change liability company has been notified in writing of the state of	ent and agree to act in this capacity. I further agr r and complete performance of my duties, and I a stered agent as provided for in Chapter 605, F.S. e in the registered office address, I hereby confire	om jamiliar wiln Or, if this	
<del>- If</del>	Changing Registered Agent, Signature of New Ro	egistered Agent	

Title/ Capacity	Name	Addiess	Type of Action
Manager	Deancurt Realty Group, Inc.	34 Greenwich Road	
		Longmeadow, MA 01106	∃Rem
Manager	Nepsa Manager LUC	380 Union Street, Suite 300	BbA⊞
		West Springfield, MA 01089	□Remo
			□Add
			☐ Remple 200 PM
****			-
		Rem	
			□Add
aforementic	n certificate, if required: no more that med amendment(s), duly authenticate	on 90 days old, evidencing the ed by the official having custody of records in the organized.  Nepsa Property Investors, Inc., its Manager	□Rem



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "DEANCURT WINTER PARK

III LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO

"POSTE VUE LLC" ON THE SEVENTEENTH DAY OF MARCH, A.D. 2020, AT

10:36 O'CLOCK A.M.



Authentication: 202610291 Date: 03-18-20