

2/8/2021

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

(((H21000054085 3)))



H210000540853ABCZ

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

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
SOUTHERN MARINAS FISH TALE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

PLEASE HONOR THE ORIGINAL SUBMISSION DATE OF 2/8/2021

WE cannot Honor 2/8/2021 This document was generated after 5:00 PM. We will honor 2/9/2021 KS

Electronic Filing Menu

Corporate Filing Menu

Help

850-617-6381

2/10/2021 11:27:53 AM PAGE 1/001 Fax Server



February 10, 2021

FLORIDA DEPARTMENT OF STATE
Division of CorporationsSOUTHERN MARINAS FISH TALE, LLC
610 BROADWAY, 6TH FLOOR
NEW YORK, NY 10012SUBJECT: SOUTHERN MARINAS FISH TALE, LLC
REF: M19000011717

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The LLC name on the document must be the same as the LLC name on the certificate. There are no spaces on the cureent LLC name. Also the new LLC name must the same as the new LLC name on the certificate. There are no spaces in the new LLC name.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L Lemieux
Regulatory Specialist IIFAX Aud. #: H21000054085
Letter Number: 721A00002975

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: Southern Marinas Fish Tale, LLC

Enter new principal office address, if applicable: 2 North Riverside Plaza

(Principal office address
MUST BE A STREET ADDRESS)

Suite 800

Chicago, Illinois 60606

Enter new mailing address, if applicable:

(Mailing address
MAY BE A POST OFFICE BOX)

2 North Riverside Plaza

Suite 800

Chicago, Illinois 60606

2. The Florida document number of this limited liability company is: M19000011717

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 12/10/2019

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

5. New name of the limited liability company: MHC Fish Tale, L.L.C.
(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: C.T. Corporation System

New Registered Office Address: 1200 South Pine Island Road

Enter Florida Street Address

Plantation

Florida 33324

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.

James H Tanks III ASSISTANT SECRETARY

If Changing Registered Agent, Signature of New Registered Agent

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:

Removal/addition of persons with authority to manage.

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Member	Southern Marinas Holdings, LLC	610 Broadway, 6th Floor	<input type="checkbox"/> Add
		New York, NY 10012	<input checked="" type="checkbox"/> Remove
General Counsel, Corporate Secretary and			
EVP	David Eldersveld	2 North Riverside Plaza, Suite 800	<input checked="" type="checkbox"/> Add
		Chicago, Illinois 60606	<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.

Sara Handibode

Signature of the authorized representative

Sara Handibode, Authorized Representative

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 THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "SOUTHERN MARINAS FISH TALE, LLC". CHANGING ITS NAME FROM "SOUTHERN MARINAS FISH TALE, LLC" TO "MHC FISH TALE, L.L.C.", FILED IN THIS OFFICE ON THE FIFTH DAY OF FEBRUARY, A.D. 2021, AT 7:49 O'CLOCK P.M.

FILED
2021 FEB -9 PM 5:24
DELAWARE SECRETARY OF STATE




Jeffrey W. Bullock, Secretary of State

7732403 8100
SR# 20210358217

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

Authentication: 202461855
Date: 02-08-21