

Division of Corporations

M20000002326

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6393

Please honor original
date 02/08/2021

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614) 290-3338
Fax Number : (954) 209-0845

****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
SM III LIFT TRS LLC

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

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2021 FEB 15 AM 10:00

STATE OF FLORIDA
DIVISION OF CORPORATIONS
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2021 FEB -8 PM 4:47

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Corporate Filing Menu

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UK
2/16/2

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: SM HI LIH TRS 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: M20000002326

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 02/28/2020

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

5. New name of the limited liability company: MHC HI LIH TRS, 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

City

Florida

33324

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.

Kimberly Laughrey

Kimberly Laughrey, Asst. Sect.

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)(c), 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 Hi Lift 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 Eldersveid	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 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 "SM HI LIFT TRS LLC", CHANGING ITS NAME FROM "SM HI LIFT TRS LLC" TO "MHC HI LIFT TRS, L.L.C.", FILED IN THIS OFFICE ON THE FIFTH DAY OF FEBRUARY, A.D. 2021, AT 7:33 O'CLOCK P.M.

SECRETARY OF STATE
JAN 15 2021 10:47 AM

2021 FEB -8 PM 4:47

FILED



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

7863480 8100
SR# 20210358059

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

Authentication: 202461526
Date: 02-08-21

State of Delaware
 Secretary of State
 Division of Corporations
 Delivered 07:33 PM 02/05/2021
 FILED 07:33 PM 02/05/2021
 SR 20210358059 - File Number 7863480

CERTIFICATE OF AMENDMENT

TO

CERTIFICATE OF FORMATION

OF

SM HI LIFT TRS LLC

It is hereby certified pursuant to Section 18-202 of the Delaware Limited Liability Company Act that:

FIRST

The name of the limited liability company is SM Hi Lift TRS LLC (the "Company").

SECOND

Article First of the Certificate of Formation of the Company is hereby deleted in its entirety and amended to read in full as follows:

"1. **NAME**: The name of the limited liability company is MHC Hi Lift TRS LLC."

THIRD

Article Second of the Certificate of Formation of the Company is hereby deleted in its entirety and amended to read in full as follows:

"2. **REGISTERED OFFICE AND AGENT**: The address of the registered office of the Company in the State of Delaware is located at 1209 Orange Street, Wilmington, Delaware 19801 and the name of the registered agent for the Company at such address is The Corporation Trust Company. "

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Amendment as of this 5th day of February, 2021.

/s/ Sara Handibode
 Sara Handibode, an Authorized Person

FILED
 2021 FEB -8 AM 4:47
 SECRETARY OF STATE
 DEPARTMENT OF REVENUE
 TALMAGE BUILDING
 HARRISBURG, PA 17103