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.

(((H20000300337 3)))



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 ALL STAR PROPERTIES LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

SEP 02 2020

D CCANELL

1/1

DocuSign Envelope ID. 888ACB79-2383-47EE-8838-07FDE2A16897

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: All Star Properties LLC	
Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	·
Enter new mailing address, if applicable: (Mailing address MAY RE A POST OFFICE ROY)	:
(Mailing address	i i i i i i i i i i i i i i i i i i i
MAY BE A POST OFFICE BOX)	
	
2. The Florida document number of this limited liability company is: M20000006813	
3. Jurisdiction of its organization: Delaware	·
Date authorized to do business in Florida: 08/06/2020	
SECTION II (5-9 complete only the applicable changes)	
5. New name of the limited liability company: ASEH Naples LLC (must contain "Limited Liability Company, " "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 Floricopy of the written consent of the managers or managing members adopting the alternate name. Thus contain "Limited Liability Company," "L.L.C." or "LLC.")	da and attach a he alternate name
6. If amending the registered agent and/or registered officer address on our records, enter the name registered agent and/or the new registered office address here:	e of the new
Name of New Registered Agent:	Agency are all world all a second
New Registered Office Address: Enter Florida Street Address	<u> </u>
, Florida	
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 ag the provisions of all statutes relative to the proper and complete performance of my dunes, and I and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. document is being filed to merely reflect a change in the registered office address. Thereby confirmability company has been nonfied in writing of this change.	Or, if this

8. If the agriculation	8. If the amendment changes person, title or capacity in accordance with 605,0902 (1)(e), indicate that change:				
Title/ Capacity	<u>Name</u>	<u>Address</u>	Type of Act		
			□A		
			□Re		
			🗆 A		
			□Ro		
			□R:		
			OA		
			□R.		

Typed or printed name of signee



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'ALL STAR PROPERTIES LLC', FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO 'ASEH NAPLES LLC' ON THE TWENTY-FIFTH DAY OF AUGUST, A.D. 2020, AT 6:49 O'CLOCK P.M.



Authentication: 203553375 Date: 08-27-20

7895489 8320 SR# 20206986298

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