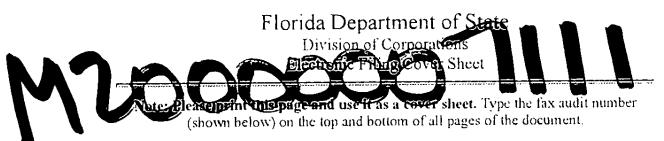
Division of Corporations



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Fax Number : (850)617-6383

From:

Account Name : INTERSTATE FILINGS LLC

Account Number : I20110000086 Phone : (718)569-2703 Fax Number : (718)504-7890

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

Email Address: ____orders@interstatefilings.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN OAKS OF KISSIMMEE OPERATIONS LLC

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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)

Enter new principal office address, if applicable:	ERATIONS LLC 440 SYLVAN AVE, SUITE	240
(Principal office address	ENGLEWOOD CLIFFS, N.	J 07632
MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	440 SYLVAN AVE, SUITE	240
(Mailing address MAY BE A POST OFFICE BOX)	ENGLEWOOD CLIFFS, N.	J 07632
2. The Florida document number of this limited li	ability company is: M200000711	1 2073
3. Jurisdiction of its organization: DELAWA		150
N8	./14/2020	2
SECTION II (5-9 complete only the applicable	changes)	
4. Date authorized to do business in Florida: OO SECTION II (5-9 complete only the applicable 5. New name of the limited liability company:	st contain "Limited Liability Company,"	"L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopte copy of the written consent of the managers or must contain "Limited Liability Company," "L.L.	anaging members adopting the alternate n	in Florida and attach a same. The alternate name
6. If amending the registered agent and/or register registered agent and/or the new registered office a	red officer address on our records, <u>enter t</u> <u>address here;</u>	he name of the new
Name of New Registered Agent		
New Registered Office Address:	Enter Florida Street	Address
	Florida	
	City	Zip Code
New Registered Agent's Signature, if changing R	enistered Agent:	rther agree to comply with

(((H20000398864 3)))

Title/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action	
MGR	SIMCHA HYMAN	440 SYLVAN AVE, SUITE 240		
		ENGLEWOOD CLIFFS, NJ 0	7632 Remove	
MBR CARS OF #1551MMEE OPERATIONS HOLDINGS LLC	CARS OF AISSIMMEE OPERATIONS HOLDINGS LLC	2123 CENTRE POINT BLVD		
		TALLAHASSEE, FL 32	Remove 2020 DFdd - 2 Meinove Add	
		Remove		
aforementio	a certificate, if required: no more than 9 med amendment(s), duly authenticated to under the law of which this entity is org	by the official having custody of records in	Remove	

Filing Fee: \$25.00