

M20000007142

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

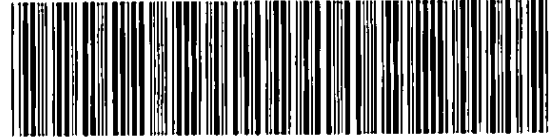
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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FILED

2021 AUG 35 AM 9:51

CLERK/CLERK OF STATE
TALLAHASSEE, FL

RECEIVED

2021 AUG 25 PM 3:43

CLERK/CLERK OF STATE
TALLAHASSEE, FL

AUG 1 2021

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 975245 7521141

AUTHORIZATION : 

COST LIMIT : \$ 25.00

ORDER DATE : August 25, 2021

ORDER TIME : 1:49 PM

ORDER NO. : 975245-005

CUSTOMER NO: 7521141

FOREIGN FILINGS

NAME: GS WINCHESTER PARK BOULEVARD,
LLC

____ CORPORATE
____ LIMITED PARTNERSHIP
XX LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

EXAMINER: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 26, 2021

CSC

RESUBMIT

Please give original
submission date as file date.

SUBJECT: GS WINCHESTER PARK BOULEVARD, LLC
Ref. Number: M20000007142

We have received your document for GS WINCHESTER PARK BOULEVARD, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

There are no provisions in chapter 605, Florida Statutes, allowing foreign limited liability companies to file a Statement of Authority. The "Statement of Authority" should be filed in the jurisdiction of formation.

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) 245-6050.

Terri J Schroeder
Regulatory Specialist III

Letter Number: 121A00020547



TALLAHASSEE, FLORIDA

2021 AUG 30 AM 11:41

RECEIVED

**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: GS WINCHESTER PARK BOULEVARD, 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 BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M20000007142

3. Jurisdiction of its organization: DE

4. Date authorized to do business in Florida: 08/18/2020

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

5. New name of the limited liability company: _____
(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: _____

New Registered Office Address: _____

Enter Florida Street Address

_____, **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 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.

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:

Matthew Ailey- updating statement of authority, see attached exhibit.

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<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
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

FILED
JAN 9 9:55 AM
CLERK OF STATE
TALLAHASSEE, FL
2021

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.

/s/ Matthew Ailey

Signature of the authorized representative

Matthew Ailey

Typed or printed name of signee

Filing Fee: \$25.00

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority:

FIRST: The name of the limited liability company is: GS Winchester Park Boulevard, LLC

SECOND: The Florida Document Number of the limited liability company is: M20000007142

THIRD: The street address of the limited liability company's principal office is:

320 Winchester Park Blvd.

Boynton Beach, Florida 33436

The mailing address of the limited liability company's principal office is:

320 Winchester Park Blvd.

Boynton Beach, Florida 33436

FOURTH: This statement of authority grants or sets limitations of authority on all persons having the status or position of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specific person on the following:

1. May execute an instrument transferring real property held in the name of the company.

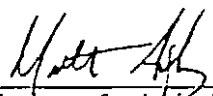
a. Granted to: Matthew Ailey

b. No authority granted to: _____

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to: Matthew Ailey

b. No authority granted to: _____



Signature of authorized representative

Matthew Ailey

Typed or printed name of signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)