(Requestor's Name)				
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(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
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(Document Number)				
Селіfied Copies	_ Certificates	s of Status		
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I ALBRITTON

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 285764 7833946

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: December 7, 2021

ORDER TIME : 8:35 AM

ORDER NO. : 285764-005

CUSTOMER NO: 7833946

FOREIGN FILINGS

NAME: M-1420 S MIAMI MGR. 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#

EXAMINER:

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: M-1420 S Miami MGR, LLC	
Name of Foreign	Limited Liability Company
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) a	are submitted for filing.
Please return all correspondence concerning this	matter to the following:
Camilo Miguel, Jr.	
Name of Person	<u> </u>
MC Manager, LLC	
Firm/Company	
2601 S. Bayshore Drive, Ste. 850	
Address	
Miami, FL 33133	
City/State and Zip Code	
CNazarkewich@mastcapital.com	
E-mail address: (to be used for future annual r	eport notification)
For further information concerning this matter, p	blease call:
Carol Nazarkewich	at (305) 531-2426
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following a \$\equiv \text{\$\frac{1}{2}\$}\$\$\$\$ Filing Fee \$ \text{\$ \text{\$ \text{\$ \text{\$ \text{\$ \text{\$ \text{\$ \text{\$ \text{\$ \text{\$ \text{\$ \text{\$ \text{\$ \text{\$ \text{\$ \qq \qquad \qq\eta} \qq \qq \qq \qq \qq \q \qq \qq \q	mount: □ \$55 Filing Fee & □ \$60 Filing Fee, Certified Copy Certificate of Status & Certified Copy

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 appear	s on the records of the FI	orida Department of
State: M-1420 S Miami MGR, LLC		٠.
Enter new principal office address, if applicable:		2:2100
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)		0
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		ـــــــــــــــــــــــــــــــــــــ
2. The Florida document number of this limited lia		-
3. Jurisdiction of its organization: Delaware		
4. Date authorized to do business in Florida: 03/04	4/2021	
SECTION II (5-9 complete only the applicable of		
5. New name of the limited liability company: M	-1420 S MIAMI GP MGF	LLC
(musi	t contain "Limited Liabil	ity Company, ""L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or mar must contain "Limited Liability Company," "L.L.C	naging members adopting	cting business in Florida and attach a g the alternate name. The alternate name
6. If amending the registered agent and/or registered registered agent and/or the new registered office ac	ed officer address on our ldress here:	records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Fire	Florida Street Address
	Enter	
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Re	•	•
I hereby accept the appointment as registered agenthe provisions of all statutes relative to the proper and accept the obligations of my position as registed document is being filed to merely reflect a change in	nt and agree to act in this and complete performan ered agent as provided fo	ce of my duties, and I am familiar with or in Chapter 605, F.S. Or, if this

If Changing Registered Agent. Signature of New Registered Agent

liability company has been notified in writing of this change.

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

Title/ Capacity	<u>Name</u>	Address	Type of Action
			DAdd
			□Remo
			□Add
			□Remo
			□Adđ
			□Remo
			□Add
			□Remo
			□Add
aforementioned am	he law of which this entity is organ	the official having custody of records in the	□Remo

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 "M-1420 S MIAMI MGR, LLC", CHANGING ITS NAME FROM "M-1420 S MIAMI MGR, LLC" TO "M-1420 S MIAMI GP MGR, LLC", FILED IN THIS OFFICE ON THE SIXTEENTH DAY OF NOVEMBER, A.D. 2021, AT 9:43 O'CLOCK A.M.



Jeffrey W. Bullock, Secretary of State

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

1.	Name of	Limited	Liability	Company:

M-1420 S MIAMI MGR, LLC

2. The Certificate of Formation of the limited liability company is hereby amended as follows:

Article FIRST is deleted in its entirety and replaced with the following:

"FIRST: The name of the limited liability company is

M-1420 S MIAMI GP MGR, LLC."

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the 16th day of November, 2021.

/s/ Camilo Miguel, Jr.
Camilo Miguel, Jr. Authorized Person