

M21000004398

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

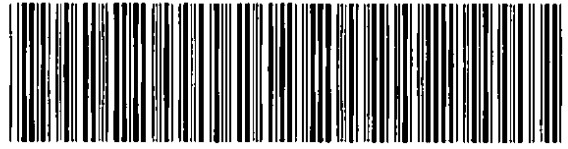
(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
2022 JUN -7 PM 4:02
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2022 JUN 13 AM 10:23
TALLAHASSEE, FLORIDA

6/14/2022



COGENCYGLOBAL

115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
866.625.0838
COGENCYGLOBAL.COM

Date: **June 07, 2022**

Account#: 120000000088

Name: **David Shulman**

Reference #: **1704273**

Entity Name: **MARLIN TOWERS I, LLC**

☐ Articles of Incorporation/Authorization to Transact Business

☒ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other _____

ISSUES? CALL

David:

850-270-0082

Authorized Amount: **\$25.00**

Signature: *David Shulman*



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 10, 2022

COGENCY GLOBAL

SUBJECT: MARLIN TOWERS I, LLC
Ref. Number: M21000004398

We have received your document for MARLIN TOWERS I, LLC and the authorization to debit your account in the amount of \$25.00. However, the document has not been filed and is being returned for the following:

You failed to make the correction(s) requested in our previous letter.

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please submit a certificate or document evidencing the name change and the date of the name change.

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.

Claretha Golden
Regulatory Specialist II

Letter Number: 822A00013000

RECEIVED
2022 JUN 13 PM 4:11
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2022 JUN -9 AM 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 8, 2022

COGENCY GLOBAL

SUBJECT: MARLIN TOWERS I, LLC
Ref. Number: M21000004398

We have received your document for MARLIN TOWERS I, LLC and the authorization to debit your account in the amount of \$25.00. However, the document has not been filed and is being returned for the following:

Please correct your coversheet to read the current name of the entity.

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

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.

Claretha Golden
Regulatory Specialist II

Letter Number: 022A00012823

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

2022 JUN 13 AM 10:23

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: Marlin Towers I, 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: M21000004398

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 04/14/2021

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

5. New name of the limited liability company: Tarpon Towers III, LLC
(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:

<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

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.

Gail Buteau
Signature of the authorized representative

Gail Buteau, CFO and Secretary

Typed or printed name of signee

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 ARE TRUE AND CORRECT COPIES OF ALL DOCUMENTS ON FILE OF "TARPON TOWERS III, LLC" AS RECEIVED AND FILED IN THIS OFFICE.

THE FOLLOWING DOCUMENTS HAVE BEEN CERTIFIED:

CERTIFICATE OF FORMATION, FILED THE TWENTY-THIRD DAY OF MARCH, A.D. 2021, AT 8:32 O'CLOCK A.M.

CERTIFICATE OF AMENDMENT, CHANGING ITS NAME FROM "MARLIN TOWERS, LLC" TO "MARLIN TOWERS I, LLC", FILED THE EIGHTH DAY OF APRIL, A.D. 2021, AT 9:09 O'CLOCK A.M.

CERTIFICATE OF AMENDMENT, CHANGING ITS NAME FROM "MARLIN TOWERS I, LLC" TO "TARPON TOWERS III, LLC", FILED THE THIRTIETH DAY OF MARCH, A.D. 2022, AT 7:29 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE AFORESAID LIMITED LIABILITY COMPANY, "TARPON TOWERS III, LLC".

A handwritten signature in black ink, reading "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

5615121 8100H
SR# 20222662679

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

Authentication: 203628619
Date: 06-08-22

CERTIFICATE OF FORMATION

OF

MARLIN TOWERS, LLC

This Certificate of Formation of Marlin Towers, LLC has been duly executed and is being filed by the undersigned authorized person for the purpose of forming a limited liability company pursuant to the Delaware Limited Liability Company Act, (6 Del. C. §§18-101, et seq.)

1. Name. The name of the limited liability company formed hereby (the "Company") is Marlin Towers, LLC.

2. Registered Office. The address of the registered office of the Company in the State of Delaware is: 850 New Burton Road, Suite 201, Dover, DE 19904 (Kent County).

3. Registered Agent. The name and address of the registered agent for service of process on the Company in the State of Delaware is Cogency Global Inc., 850 New Burton Road, Suite 201, Dover, DE 19904 (Kent County).

4. Bankruptcy of a Member. For a period of sixty (60) days following the date on which the Company becomes aware that a bankruptcy petition has been filed by or against any member of the Company, the Company shall have the option to purchase all of such member's interests in the Company, exercisable by delivering written notice of its exercise of such option to such member and, if applicable, to the bankruptcy trustee and, provided that within sixty (60) days after its exercise of such option the Company pays to such member or trustee, as applicable, an amount equal to the capital account balance attributable to such member's interests in the Company (calculated pursuant to the Limited Liability Company Agreement of the Company), such member's interests in the Company automatically shall transfer to and vest in the Company without any further action by the Company and without any action by such member or trustee.

IN WITNESS WHEREOF, the undersigned authorized person has caused this Certificate of Formation to be duly executed as of the 22nd day of March 2021.

/s/ Jennifer Hardy

Jennifer Hardy
Authorized Person

**STATE OF DELAWARE
CERTIFICATE OF AMENDMENT**

1. Name of Limited Liability Company: Marlin Towers, LLC.
2. The Certificate of Formation of the limited liability company is hereby amended as follows:

The name of the Company set forth in the Certificate of Formation be and the same hereby is amended so as to read in its entirety as follows:

1. The name of the limited liability company is: Marlin Towers I, LLC.

IN WITNESS WHEREOF, the undersigned has executed this Certificate on the 8th day of April 2021.

/s/ Jennifer Hardy
Jennifer Hardy, Authorized Person

State of Delaware
Secretary of State
Division of Corporations
Delivered 07:29 PM 03/30/2022
FILED 07:29 PM 03/30/2022
SR 20221242289 - File Number 5615121

STATE OF DELAWARE
CERTIFICATE OF AMENDMENT
OF
MARLIN TOWERS I, LLC

1. Name of Limited Liability Company: Marlin Towers I, LLC
2. The Certificate of Formation of the limited liability company is hereby amended as follows:

RESOLVED, that the Certificate of Formation of the Company, as amended, be further amended by striking therefrom Section 1 in its entirety and by adding a new Section 1 to read in full as follows:

1. Name. The name of the limited liability company formed hereby (the "Company") is Tarpon Towers III, LLC.

IN WITNESS WHEREOF, the undersigned has executed this Certificate as of the 23rd day of March, 2022.

/S/ RYAN D. LEPENE
Ryan D. Lepene, Authorized Person