Division of Corporations Electronic Filing Cover Sheet

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(((H21000356951 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : DRIVER, MCAFEE, PEEK & HAWTHORNE, P.L.

Account Number : I20020000137 Phone : (904)301-1269 Fax Number : (904)301-1279

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

Email Address:	
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HUNTER'S RIDGE ACQUISITION AND DEVELOPMENT, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

SEP 2 4 2021

A. LUNT

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H210003569513

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		Department of
State: Hunter's Ridge Acquisition and Developme	ent, LLC	
Enter new principal office address, if applicable:		
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)		2821 SEP 23
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		P 23 An io:
2. The Florida document number of this limited liab	bility company is: M2100000	_
3. Jurisdiction of its organization: Delaware		
4. Date authorized to do business in Florida: April	15, 2021	
SECTION II (5-9 complete only the applicable c	hanges)	
5. New name of the limited liability company: (must	contain "Limited Liability Co	ompany, ""L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or manust contain "Limited Liability Company," "L.L.C.	aging members adopting the	business in Florida and attach a alternate name. The alternate name
6. If amending the registered agent and/or registered registered agent and/or the new registered office add	d officer address on our recor dress here:	ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Flori	
	Enter Flori	
-	City	, Florida Zip Code
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent the provisions of all statutes relative to the proper a and accept the obligations of my position as registed document is being filed to merely reflect a change it liability company has been notified in writing of this	t and agree to act in this cape ind complete performance of red agent as provided for in (in the registered office addres	my duties, and I am familiar with Chapter 605, F.S. Or, if this

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itle/ Capacity	<u>Name</u>	Address	Type of Action
MGR 	Hunter's Ridge Manager, LLC	111 Coleman Boulevard, Suite 400	•Add
	-	Mount Pleasant, South Carolina 29464	□Remov
AGR	Glen Fishman	237 JUMPING BROOK DR.	□Add
		TOMS RIVER, NJ 08755	• Remove
			13 SER ⊋3 □-
			□Reconstruction
			~ □Add
			□Remove
			□Add
aforemention	certificate, if required: no more than ed amendment(s), duly authenticated nder the law of which this entity ifor	by the official having custody of records in the	□Remove

Filing Fee: \$25.00