

V21000010797

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

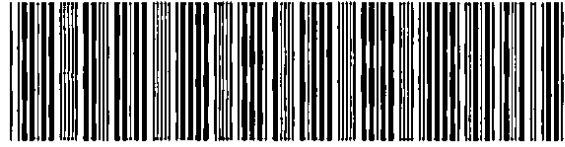
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300373754303

2021 SEP 22 PM 1:00

09/22/21 - 01001 - 017 **75.00

RECEIVED

2021 SEP 22 PM 1:22

OFFICE OF CORPORATIONS
TALLAHASSEE, FLORIDA

NAME
CHG

SEP 23 2021

ALBRITTON

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: 9/22 DANNY

CERTIFIED COPY _____

XX PHOTOCOPY _____

CUS _____

XX FILING FOREIGN LLC AMEND

TMGOC HGI SARASOTA LLC

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

**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: TMGOC HGI Sarasota 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)**

2021 SEP 22 PM 11:00
FILED

2. The Florida document number of this limited liability company is: M21000010797

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: August 18, 2021

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

5. New name of the limited liability company: TMGOC 8270 SARASOTA LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

TMGOC 8270 SARASOTA 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.

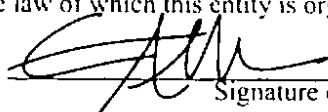
If Changing Registered Agent, Signature of New Registered Agent

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
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_____	_____	_____	<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.



Signature of the authorized representative

Glenn Alba

Typed or printed name of signee

Filing Fee: \$25.00

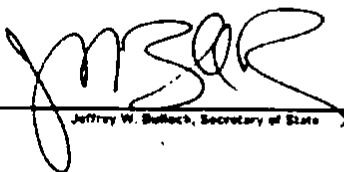
Delaware

Page 1

The First State

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 "TMGOC HGI SARASOTA LLC", CHANGING ITS NAME FROM "TMGOC HGI SARASOTA LLC" TO "TMGOC 8270 SARASOTA LLC", FILED IN THIS OFFICE ON THE NINETEENTH DAY OF AUGUST, A.D. 2021, AT 5:37 O`CLOCK P.M.




Jeffrey W. Bullock, Secretary of State

6170176 8100
SR# 20213030442

Authentication: 203966637
Date: 08-19-21

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

**STATE OF DELAWARE
CERTIFICATE OF AMENDMENT**

1. Name of Limited Liability Company:
TMGOC HGI SARASOTA LLC

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

Article First is hereby amended to change the name to: TMGOC 8270 SARASOTA LLC

FIRST: The name of the limited liability company is TMGOC 8270 SARASOTA LLC

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the 19TH day of AUGUST, A.D. 2021.

By: /s/ Ramy Odeh
Authorized Person(s)

Name: Ramy Odeh
Print or Type