

MZ1000000950

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

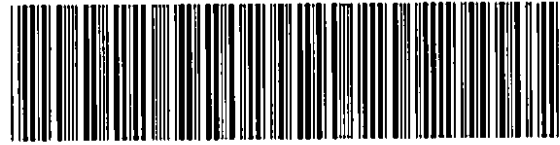
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

Office Use Only



500370210575

FILED

2021 AUG 31 AM 8:52

SECRETARY OF STATE
TALLAHASSEE, FL

RECEIVED

2021 AUG 31 AM 11:49



SECRETARY OF STATE
TALLAHASSEE, FL

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

ACCOUNT NO. : I20000000195

REFERENCE : 975682 7172389

AUTHORIZATION :



COST LIMIT : \$ 251.00

ORDER DATE : August 25, 2021

ORDER TIME : 3:29 PM

ORDER NO. : 975682-020

CUSTOMER NO: 7172389

FOREIGN FILINGS

NAME: PREMIER 4B/SOM FT. MYERS, 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: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Premier 4B/SOM Ft. Myers, LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mary Eggers McCarroll

Name of Person

Principal Life Insurance Company

Firm/Company

711 High Street

Address

Des Moines, Iowa 50392

City/State and Zip Code

roepsch.bob@principal.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Eggers McCarroll at (515) 362-1223

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 amount:

☐ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, 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 appears on the records of the Florida Department of

State: Premier 4B/SOM Ft. Myers, 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: M21000010950

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: August 20, 2021

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

5. New name of the limited liability company: Premier 4B/SOM Ft. Myers 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

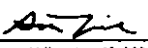
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TALLAHASSEE, FL

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)(c), indicate that change:
the following persons are added as Managers

| <u>Title/ Capacity</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|------------------------|--------------------|------------------------|---|
| Manager | Troy A. Koerselman | 711 High Street | <input checked="" type="checkbox"/> Add |
| | | Des Moines, Iowa 50392 | <input type="checkbox"/> Remove |
| Manager | Brenda M. Wadle | 711 High Street | <input checked="" type="checkbox"/> Add |
| | | Des Moines, Iowa 50392 | <input type="checkbox"/> Remove |
| Manager | David Graves | 711 High Street | <input checked="" type="checkbox"/> Add |
| | | Des Moines, Iowa 50392 | <input type="checkbox"/> Remove |
| Manager | Nathan G. Adams | 711 High Street | <input checked="" type="checkbox"/> Add |
| | | Des Moines, Iowa 50392 | <input type="checkbox"/> Remove |
| Manager | Kevin J. Stubbs | 711 High Street | <input checked="" type="checkbox"/> Add |
| | | Des Moines, Iowa 50392 | <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.


Andrew Miller (Aug 25, 2021 09:33 CDT)

Signature of the authorized representative

Andrew Miller

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 THAT THE SAID "PREMIER 4B/SOM FT. MYERS, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "PREMIER 4B/SOM FT. MYERS LLC" ON THE TWENTY-FIFTH DAY OF AUGUST, A.D. 2021, AT 2:21 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PREMIER 4B/SOM FT. MYERS LLC" WAS FORMED ON THE NINETEENTH DAY OF AUGUST, A.D. 2021.



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

6177934 8320
SR# 20213116453

Authentication: 204040303
Date: 08-30-21

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