

M21000015188

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

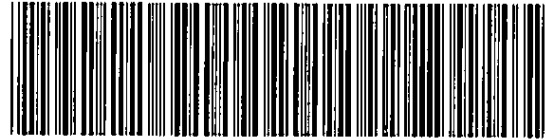
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 DEC -2 AM 9:23

REC'D

Name
chg

DEC 03 2021
ALBRITTON

TALLAHASSEE, FLORIDA

2021 DEC -2 AM 11:34

RECEIVED

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

ACCOUNT NO. : I20000000195

REFERENCE : 276171 7294880

AUTHORIZATION : *[Signature]*

COST LIMIT : \$25.00

ORDER DATE : December 1, 2021

ORDER TIME : 10:09 AM

ORDER NO. : 276171-020

CUSTOMER NO: 7294880

FOREIGN FILINGS

NAME: FG 801 ALTON OWNER LLC

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: *[Signature]*

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FG 801 Alton Owner 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:

Maggie Moreno

Name of Person

Fifteen Group Capital LLC

Firm/Company

47 NE 36th Street

Address

Miami FL 33137

City/State and Zip Code

mmoreno@fifteengroup.com

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

For further information concerning this matter, please call:

Ron Wulf

at (646) 594-9054

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:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee & Certificate of Status | <input type="checkbox"/> \$55 Filing Fee & Certified Copy | <input type="checkbox"/> \$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: FG 801 Alton Owner 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)

47 NE 36th Street

Miami FL 33137

2. The Florida document number of this limited liability company is: M21000015188

3. Jurisdiction of its organization: DE

4. Date authorized to do business in Florida: November 12, 2021

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

5. New name of the limited liability company: FG 801 Arthur Godfrey Owner 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.

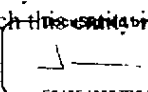
If Changing Registered Agent, Signature of New Registered Agent

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> |
|------------------------|-------------|----------------|---------------------------------|
| <hr/> | <hr/> | <hr/> | <input type="checkbox"/> Add |
| | | <hr/> | <input type="checkbox"/> Remove |
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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

Ian Sanders

 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 IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "FG 801 ALTON OWNER LLC", CHANGING ITS NAME FROM "FG 801 ALTON OWNER LLC" TO "FG 801 ARTHUR GODFREY OWNER LLC", FILED IN THIS OFFICE ON THE FIRST DAY OF DECEMBER, A.D. 2021, AT 5:36 O'CLOCK P.M.



Jeffrey W. Bullock, Secretary of State

6360646 8100
SR# 20213947439

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

Authentication: 204840262
Date: 12-02-21

**STATE OF DELAWARE
CERTIFICATE OF AMENDMENT**

1. Name of Limited Liability Company: FG 801 ALTON OWNER LLC
2. The Certificate of Formation of the limited liability company is hereby amended as follows:

The name of the limited liability company is hereby amended to FG 801 ARTHUR GODFREY OWNER LLC.

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the 1st day of December, A.D. 2021.

By: /s/ Ian Sanders

Authorized Person(s)

Name: Ian Sanders

Print or Type