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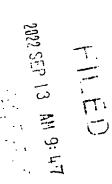
	Requestor's Name)	
	Address)	
`	<u>nudicas)</u>	
(Address)	
	City/State/Zip/Phone #)	
,	onyrotaterziph none 4)	
PICK-UP	WAIT	MAIL
	Business Entity Name)	
•	,	
_		
(Document Number)	
Certified Copies	_ Certificates of	Status
	<u> </u>	
Special Instructions to	Filing Officer:	

Office Use Only



800394367308

LLC amend



2022 SEP 13 PH 3: 45

A. RAMSEY SEP 1 4 2022 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 952924 8362423
AUTHORIZATION :
COST LIMIT \$ 25.00
ORDER DATE : September 13, 2022
ORDER TIME : 1:44 PM
ORDER NO. : 952924-005
CUSTOMER NO: 8362423
FOREIGN FILINGS
NAME: AREA 15 ORLANDO LLC
CORPORATE LIMITED PARTNERSHIP 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: Eyliena Baker EXT#

EXAMINER:

COVER LETTER

Division of Corporations	
SUBJECT: Area 15 Orlando LLC	
	reign Limited Liability Company
Dear Sir or Madam:	
The enclosed application, certificate and fee	e(s) are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Rick Chung	
Name of Person	
Area 15	
Firm/Company	
3215 South Rancho Drive	
Address	
Las Vegas, Nevada 89012	
City/State and Zip C	Code
rchung@area15.com	
E-mail address: (to be used for future ann	nual report notification)
For further information concerning this matt	ter, please call:
Rick Chung	at ()
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following	ng amount:
■\$25 Filing Fee □ \$30 Filing Fee &	☐ \$55 Filing Fee & ☐ \$60 Filing Fee,
Certificate of Status	
CR2E055 (9/15)	r.

2

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: Area 15 Orlando LLC	·	
Enter new principal office address, if applicable:	11-11-11-11-11-11-11-11-11-11-11-11-11-	
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)	-	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		ř
		$\frac{1}{2}$ ω
2. The Florida document number of this limited liabilit		417
Jurisdiction of its organization: Delaware		
4. Date authorized to do business in Florida: 12/06/202	21	-
SECTION II (5-9 complete only the applicable chan		
New name of the limited liability company: (must con	ntain "Limited Liability Co	mpany, ""L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for copy of the written consent of the managers or managin must contain "Limited Liability Company," "L.L.C." o	ng members adopting the a	business in Florida and attach a dternate name. The alternate name
6. If amending the registered agent and/or registered of registered agent and/or the new registered office addres	Ticer address on our records here:	ls, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Floria	la Street Address
	City	, Florida Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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

itle/ Capacity	<u>Name</u>	Address Ty	oe of Actio
000	Dan Pelson	3215 South Rancho Drive, Las Vegas 89102	■Add
			_□Rem
President	Winston Fisher	3215 South Rancho Drive, Las Vegas 89102	_ ■Add
			□Rem
/P /Treas	Sam Rosenberg	3215 South Rancho Drive, Las Vegas 89102	■Add
			□Remo
			_ □Add
			□Rem
			□Add
aforemention	inder the law of which this entity is organ	the official having custody of records in the	□Remo

Filing Fee: \$25.00