1421000016828

(Re	equestor's Name)	
(Ad	idress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Name)	_
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
		

Office Use Only



200378371332

THE WALL TO



Y SULKER JAH 12 2022

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 01/11/2022	-	₩WALK IN
ENTITY NAME VIERA	OPERATING INVESTMENTS LLC	
DOCUMENT NUMBER_		
	PLEASE FILE THE ATTACHED AND RETURN	
xxxxx	Plain Copy	
	Certified Copy	
	Certificate of Status	
**	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**	
	Certified Copy of Arts & Amendments	
	Certificate of Good Standing	
	APOSTILLE' / NOTARIAL CERTIFICATION	
COUNTRY OF DESTINA	TION	
NUMBER OF CERTIFICA	TES REQUESTED	
TOTAL OWED \$25	ACCOUNT #: I201600000	72
	- 1991/	

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)

Enter new principal office address, if applicable:	1000 Gates Avenue
Principal office address	Brooklyn NY 11221
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 lia	ability company is: M21000016828
3. Jurisdiction of its organization: Delaware	
4. Date authorized to do business in Florida: $\frac{12/1}{1}$	0/2021
SECTION II (5-9 complete only the applicable	
5. New name of the limited liability company: (mus	st contain "Limited Liability Company," "L.L.C.," or-"LLC.
If name unavailable, enter alternate name adopted topy of the written consent of the managers or manust contain "Limited Liability Company," "L.L.	d for the purpose of transacting business in Florida and attach inaging members adopting the alternate name. The alternate n C." or "LLC.")
6. If amending the registered agent and/or register registered agent and/or the new registered office a	red officer address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida Street Address
 	, Florida City Zip Code

If Changing Registered Agent, Signature of New Registered Agent

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.

Fitle/ Capacity	<u>Name</u>	Address 1	ype of Action
AUTH	Sam Gutman	1000 Gates Avenue	= Add
		Brooklyn NY 11221	□Remo
			□Add
			□Remo
			□Add
			□Remo
			□Add
			□Remo
			□Add
aforemention	a certificate, if required: no more t ned amendment(s), duly authentica ander the law of which this entity:	ated by the official having custody of records in the	□Remo
	/S/ Sam Gutman		

Filing Fee: \$25.00