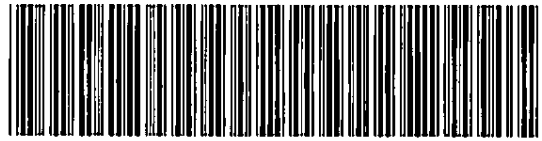


M22000000113



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FILED

2022 FEB - 7 PM 12: 36

SECRETARY OF STATE
TALLAHASSEE, FL

SECRETARY OF STATE

2022 FEB - 7 PM 3: 19

TALLAHASSEE, FLORIDA

Handwritten signature

FEB 08 2022
ALBRITTON

(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

Sunshine State Corporate Compliance Company

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

DATE 02/07/2022

****WALK IN****

ENTITY NAME Town Square Real Estate Management LLC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXX

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 DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$25

ACCOUNT #: I20160000072

S. R. J. / J. J. J.

**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: Town Square Real Estate Management LLC

Enter new principal office address, if applicable: 268 Mooring Line Drive

(Principal office address

MUST BE A STREET ADDRESS)

Naples, FL 34102

Enter new mailing address, if applicable:

(Mailing address

MAY BE A POST OFFICE BOX)

268 Mooring Line Drive

Naples, FL 34102

2022 FEB - 1 PM 12: 36
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

2. The Florida document number of this limited liability company is: M22000000113

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 1/3/2022

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

5. New name of the limited liability company: _____
(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: 268 Mooring Line Drive

Enter Florida Street Address

Naples

City

Florida

34102

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

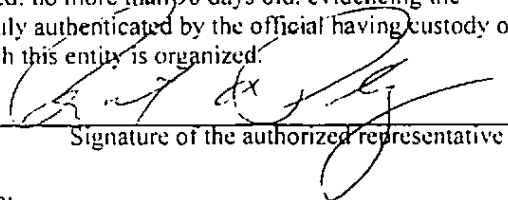
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

Change of Member's Address

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>Member</u>	<u>Robert A. Platzer</u>	<u>268 Mooring Line Drive, Naples FL 34102</u>	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
<u>Member</u>	<u>Robert A. Platzer</u>	<u>2828 Crayton Road, Naples, FL 34103</u>	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<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

Robert A. Platzer

Typed or printed name of signee

Filing Fee: \$25.00