M22000005589

(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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2022 MAY -5 PM 3:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
2022 MAY -5 PM 2:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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5/6

CORPORATE ACCESS, INC.

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WALK IN

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	CERTIFIED COPY	
XX	PHOTOCOPY	
	CUS	
XX	FILING	FOREIGN AMEND

1. 363 COCOANUT ROW PROPCO LLC
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 363 COCOANUT ROW PROPCO 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:

AGOSTINO PERCOCO
Name of Person

C/O METRO INTERNATIONAL TRADE SERVICES LLC
Firm/Company

2500 ENTERPRISE DRIVE
Address

ALLEN PARK, MICHIGAN 48101
City/State and Zip Code

apercoco@mtroflz.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Agostino Percoco at (313) 727-7465
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

CR2E055 (9/15)

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

FILED
2022 MAY -5 PM 2:03
SECRETARY OF STATE
TALLAHASSEE, FL

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: 363 COCOANUT ROW PROPCO 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: M22000005589

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: April 12, 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: _____
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:

The identity of the Member of 363 Cocoanut Row Propco LLC has changed.

Title/ Capacity	Name	Address	Type of Action
Member	363 COCOANUT ROW OPCO LLC	c/o Rosenberg & Estis, P.C., 733 Third Avenue	☐Add
		NY, NY 10017, Attn.: Eric S. Orenstein	■Remove
Member	1K MUSEUM HOLDINGS LLC	c/o Metro, 2500 Enterprise Drive	■Add
		Allen Park, Michigan 48101	☐Remove
			☐Add
			☐Remove
			☐Add
			☐Remove
			☐Add
			☐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.

/S/ Eileen Sawyer
Signature of the authorized representative
Eileen Sawyer, President of
1K Museum Holdings LLC, Member of 363 Cocoanut Row Propco LLC

Typed or printed name of signee

Filing Fee: $25.00