Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 : (855)498-5500 Phone Fax Number : (800)432-3622

Enter the email address for this business entity to be used for future $\tilde{\ }$ annual report mailings. Enter only one email address please.

Email	Address:	
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H22000143012 3

COVER LETTER

	TO: Registration Section Division of Corporations		
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: Lindy Duffney Name of Person Katzen Fooshée, PLLC Firm/Company 14800 Quorum Drive, Suite 450 Address Dallas, Texas 75254 City/State and Zip Code lindy@katzenfooshee.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Lindy Duffney at (214	SUBJECT: Mount Fuji Miami, LLC		
The enclosed application, certificate and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Lindy Duffney Name of Person Katzen Fooshée, PLLC Firm/Company 14800 Quorum Drive, Suite 450 Address Dallas, Texas 75254 City/State and Zip Code lindy@katzenfooshee.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Lindy Duffney at (214	Name of Forei	gn Limited Liabi	ility Company
Please return all correspondence concerning this matter to the following: Lindy Duffney Name of Person Katzen Fooshée, PLLC Firm/Company 14800 Quorum Drive, Suite 450 Address Dallas, Texas 75254 City/State and Zip Code lindy@katzenfooshee.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Lindy Duffney at (214	Dear Sir or Madam:		
Lindy Duffney Name of Person	The enclosed application, certificate and fee(s) are submitted f	for filing.
Name of Person Katzen Fooshée, PLLC Firm/Company 14800 Quorum Drive, Suite 450 Address Dallas, Texas 75254 City/State and Zip Code lindy@kazzenfooshee.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Lindy Duffney at (214) 932-6583 Name of Person Area Code & Daytime Telephone Number Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following amount: □\$25 Filing Fee □\$30 Filing Fee & □\$55 Filing Fee & □\$60 Filing Fee, Certificate of Status Certified Copy Certificate of Status	Please return all correspondence concerning the	nis matter to the	following:
Ratzen Fooshée, PLLC Firm/Company	Lindy Duffney		
Firm/Company 14800 Quorum Drive, Suite 450 Address Dallas, Texas 75254 City/State and Zip Code lindy@katzenfooshee.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Lindy Duffney at (214) 932-6583 Name of Person Area Code & Daytime Telephone Number Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following amount: \$\square\$ \square\$ \$55 \text{ Filing Fee} \square \$60 \text{ Filing Fee}, \quare Certificate of Status & Certified Copy Certificate of Status	Name of Person		-
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Address Dalhas, Texas 75254 City/State and Zip Code lindy@katzenfooshee.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Lindy Duffney at (214	Firm/Company		-
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Name of Person Name of Person Area Code & Daytime Telephone Number Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following amount: □\$25 Filing Fee Street Address: Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassec, FL 32303 Enclosed is a check for the following amount: □\$25 Filing Fee Certificate of Status Certified Copy Certificate of Status &	E-mail address: (to be used for future annua	il report notificat	tion)
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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)

 Name of limited liability Company as it appears 	on the records of the Fl	orida Department of			
State: Mount Puji Miami, LLC					
Enter new principal office address, if applicable:					
(<u>Principal office address</u> MUST BE A STREET ADDRESS)				_	
-		···-	1 -	202;	
				A	
Enter new mailing address, if applicable: (Mailing address			- <u>-</u> · - ·	<u> </u>	الد
MAY BE A POST OFFICE BOX		·	•• .	0	
			• • •	7	90
2. The Florida document number of this limited liab	ility company is: M220	00005812		<u>:</u>	
2. The Florida document number of this infined has	mity company is			7	
3. Jurisdiction of its organization: Texas					
4. Date authorized to do business in Florida: April	15, 2022		<u> </u>		
SECTION II (5-9 complete only the applicable cl					
5. New name of the limited liability company: 630					
5. New name of the limited liability company:(must	contain "Limited Liabil	ity Company, " "L.L.	C.," or "LI	.C.")	
(If name unavailable, enter alternate name adopted topy of the written consent of the managers or manamust contain "Limited Liability Company," "L.L.C.	aging members adoptin	acting business in Flor g the alternate name.	rida and atta The alternat	ech a te nam	e
6. If amending the registered agent and/or registered registered agent and/or the new registered office add	d officer address on our dress here;	records, enter the nan	ne of the ne	<u>:w</u>	
Name of New Registered Agent:			<u>-</u>		
New Registered Office Address:	Enter	Florida Street Addres	55		
		Florida			
	City	, Florida _	Zip Code		
New Registered Agent's Signature, if changing Reg	zistered Agent:				
I hereby accept the appointment as registered agent the provisions of all statutes relative to the proper a and accept the obligations of my position as registed document is being filed to merely reflect a change in	t and agree to act in thi ind complete performan red agent as provided f	ce of my duties, and l or in Chapter 605, F.:	' am familia S. Or, if this	ir with S	

If Changing Registered Agent, Signature of New Registered Agent

liability company has been notified in writing of this change.

If the amendment c	hanges person, title or capacity in acc	cordance with 605.0902 (1)(c), indicate that	t change:
tle/ Capacity	Name	Address	Type of Action
			□Add
			□Remo
			□Add
			□Remo
	<u> </u>		DAdd
			□Remo
			□Add
			□Remo
			□Add
aforementioned an	the law of which this entity is organi	he official having custody of records in th	c

Filing Fee: \$25.00

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Form 424

Secretary of State P.O. Box 13697 Auslin, TX 78711-3697 FAX: 512/463-5709



Certificate

Filed in the Office of the Secretary of State of Texas Filing #: 804486810 04/18/2022 Document #: 1140401590002 Image Generated Electronically

Filing Fee: See instructions for Web Filing of Amendment **Entity Information** The filing entity is a: Domestic Limited Liability Company (LLC) The name of the filing entity is: Mount Fuji Miami, LLC The file number issued to the filing entity by the secretary of state is: 804486810 Amendment to Name The amendment changes the formation document of the filing entity to change the article or provision that names the entity. The article or provision is amended to read as follows: The name of the filing entity is: 6301 Pine Tree Drive, LLC A letter of consent, if applicable, is attached. Statement of Approval The amendment has been approved in the manner required by the Texas Business Organizations Code and by the governing documents of the entity. Effectiveness of Filing A. This document becomes effective when the document is filed by the secretary of state. I.B. This document becomes effective at a later date, which is not more than ninety (90) days from the date of its filing by the secretary of state. The delayed effective date is: Execution The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument and declares under penalty of perjury that the undersigned is authorized under the Texas Business Organizations Code to execute the filing instrument.

> Virginia McCorkle Signature of authorized person

FILING OFFICE COPY

Date: **April 18, 2022**

H220001430123

John B. Scott Secretary of State

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



CERTIFICATE OF FILING OF

6301 Pine Tree Drive, LLC 804486810

[formerly: Mount Fuji Miami, LLC]

The undersigned, as Secretary of State of Texas, hereby certifies that a Certificate of Amendment for the above named entity has been received in this office and has been found to conform to the applicable provisions of law.

ACCORDINGLY, the undersigned, as Secretary of State, and by virtue of the authority vested in the secretary by law, hereby issues this certificate evidencing filing effective on the date shown below.

Dated: 04/18/2022

Effective: 04/18/2022



John B. Scott Secretary of State