M22000015767

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City State/Zip/Fhone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only



2013 0 24 AH 10: 56 STATE ALLAHASSEE FLOR 2023 FEB 24 AM II: 25 RECEIVED

Office Use Uniy

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

> ACCOUNT NO. : I20000000195 REFERENCE : 522447 434143 AUTHORIZATION : Sprenderman

COST LIMIT : \$ 25.00

- ORDER DATE : February 23, 2023
- ORDER TIME : 9:56 AM
- ORDER NO. : 522447-010
- CUSTOMER NO: 4341431

FOREIGN FILINGS

NAME: COVE HOME SALES - VENTURE IV, LLC

CORPORATE LIMITED PARTNERSHIP

XX LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

<u>CERTIFIED COPY</u> XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

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: Cove Home Sales - Venture IV, LLC

.

Enter new principal office address, if applicable:	
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)	
Enter new mailing address, if applicable: (<u>Mailing address</u>) <u>MAY BE A POST OFFICE BOX</u>)	AHID: 56
2. The Florida document number of this limited lia	bility company is:
3. Jurisdiction of its organization:	
4. Date authorized to do business in Florida: $\frac{10/12}{10}$	2/2022
SECTION II (5-9 complete only the applicable of	changes)
5. New name of the limited liability company:(must	t contain "Limited Liability Company," "L.L.C.," or "LLC.")
	for the purpose of transacting business in Florida and attach a naging members adopting the alternate name. The alternate name C." or "LLC.")
6. If amending the registered agent and/or registered registered agent and/or the new registered office agent	ed officer address on our records, <u>enter the name of the new</u>
Name of New Registered Agent:	
New Registered Office Address:	

Enter Florida Street Address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

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

1

•

Title/ Capacity	<u>Name</u>	Address	Type of Action
President	Colleen Edwards	2999 North 44th Street, Ste 200	🗆 🛆 dd
		Phoenix, Arizona 85018	Remov
			□Add
			🗆 Remov
		<u> </u>	🗆 Add
			□∧dd
			🗆 Add
			Remov

			, шк	emove
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.		0.00	
	Signature of the authorized representative		Û.Û	:
	Justin Jannacone, Authorized Signatory for Cove TRS - Venture IV, LLC	<u>.</u> ,<	24	ť ••
	Typed or printed name of signee	- PS	AH	រ៍វដ្
	Filing Fee: \$25.00		ö	\smile