M2300012688

(R	Requestor's Name)	
(A	Address)	
(A	Address)	
(C	City/State/Zip/Phone	e #)
☐ 5ICK-N5	☐ WAIT	MAIL
(E	Business Entity Nan	me)
(C	Document Number)	
ertified Copies	Certificates	s of Status
Special Instructions to	o Filing Officer	

Office Use Only



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DIVISION OF COUNTY OF STAIL OF COUNTY OF COUNT





Post Office Bo 280 • Fort Myers, FL 33902-0280

<u>Tel: 239.344,1100 • Fax: 239.344,1200 • www.henlaw.com</u>

Bonita Springs • Naples

Reply to Matthew L. Brust Okrect Fax Number 239 344 1576 Okrect Dial Number 239 344,1147 E-Mail matthew brust@henlaw.com

October 17, 2023

VIA FEDERAL EXPRESS

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: Amendment to Foreign Florida Qualification

Treeline Fort Myers Equity Owner, LLC

Dear Sir or Madam:

Enclosed please find Application by Foreign Limited Liability Company to File Amendment to Certificate of Authority to Transact Business in Florida, along with the certificate of good standing for filing with the Division of Corporations on behalf of the above-referenced entity. Our Check No. 686750 in the amount of \$55.00 is also enclosed to cover the filing fees and certified copy.

Please return confirmation and certified copy of this filing to my attention in the enclosed prepaid FedEx envelope.

Should you need anything further from us in order to process the enclosed Amendment, please do not hesitate to contact me.

Sincerely,

Matthew L. Brust

Matthew L Brust

MLB/thb Enclosures

Henderson, Franklin, Starnes & Holt, P.A.

2023 OCT 18 PM 12: 40

COVER LETTER

Ų	ation Secton of Corp				
SUBJECT: _	REELINE	FORT MYERS EQUITY	OWNER, LLC		
SUBJECT: _		Name of Foreig	n Limited Liab	ility Com	npany
Dear Sir or Ma	ndam:				
The enclosed a	ipplication	, certificate and fee(s)	are submitted	for filing.	
Please return a	ll correspo	ondence concerning thi	s matter to the	following	g:
	МАТ	THEW L. BRUST			
	Ŋ	lame of Person		_	
HENDERS	ON, FRAN	KLIN, STARNES & HOL	.Т, Р.А.		
		irm/Company		_	
	171.	5 MONROE STREET			
		Address		_	
	FORT M	YERS, FLORIDA 33901			
	(City/State and Zip Code	e	_	
	HFRA	@HENLAW.COM			
E-mail addr	ess: (to be	used for future annual	report notifica	ition)	
For further inf	ormation (concerning this matter,	nlease call:		
MATTHEW L.		······································	239	344-1	147
	Name of	Person	_ at (Area Code	_) : & Dayti	me Telephone Number
Regist Divisi P.O. E	g Address: tration Secon of Cor Box 6327 tassee, FL	porations		Division The Cer 2415 N.	Address: Aution Section In of Corporations Intre of Tallahassee Introduce Monroe Street, Suite 810 Interessee, FL 32303
Enclos □\$25 Filing F CR2E055 (9/15)		seck for the following \$30 Filing Fee & Certificate of Status	amount: \$55 Filing Certified 0		☐ \$60 Filing Fee, Certificate of Status & Certified Copy

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: TREELINE FORT MYERS EQUITY OWNER, 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)	<u> </u>
2. The Florida document number of this limited liability company is: M23000012688	
3. Jurisdiction of its organization: DELAWARE	1.7
4. Date authorized to do business in Florida: 10/3/2023	
SECTION II (5-9 complete only the applicable changes)	
5. New name of the limited liability company: TREELINE FORT MYERS OWNER, LLC (must contain "Limited Liability Company, " "L.L.	C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Flocopy of the written consent of the managers or managing members adopting the alternate name, must contain "Limited Liability Company," "L.L.C." or "LLC.")	orida and attach a The alternate name
6. If amending the registered agent and/or registered officer address on our records, enter the na registered agent and/or the new registered office address here:	ime of the new
Name of New Registered Agent:	
New Registered Office Address: Enter Florida Street Address	ess
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 the provisions of all statutes relative to the proper and complete performance of my duties, and and accept the obligations of my position as registered agent as provided for in Chapter 605, F document is being filed to merely reflect a change in the registered office address. I hereby conliability company has been notified in writing of this change.	F.S. Or, if this

8. If the amendment changes person, title or capacity in accordance with 605,0902 (1)(e), indicate that change:						
itle/ Capacity	Name	Address	Type of Action			
			□Add			
			□Remove			
<u></u>	· · · · · · · · · · · · · · · · · · ·		□Add			
			Remove			
			2023_0CT 8			
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			□ Remeye			
			©Remove			
			□Add			
aforementioned am	ne law of which this entity is orga	y the official having custody of records in the	□Remove			

Filing Fee: \$25.00

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TREELINE FORT MYERS OWNER, LLC" IS

DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF SEPTEMBER, A.D. 2023.

2023 OCT 18 PH 12: 40

OIVISION OF CORPORATION



Authentication: 204237570

Date: 09-25-23

7568733 8300 SR# 20233558733