

M24000001991

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H24000255604 3))



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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : NELSON MULLINS RILEY & SCARBOROUGH OF BOCA RATON
Account Number : 076376001555
Phone : (803)255-9617
Fax Number : (561)483-7321

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ameran@bbxcapital.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
DAVIE LOGISTICS PARK OWNER, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$55.00

K. SALY

JUL 30 2024

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: Davie Logistics Park 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)

2. The Florida document number of this limited liability company is, M24000001991

3. Jurisdiction of its organization, Delaware

4. Date authorized to do business in Florida: February 15, 2024

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

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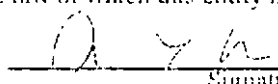
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction

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

See below and attached Rider.

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
President	Mark Levy	201 E Las Olas Blvd, Suite 1900	☒ Add
		Fort Lauderdale, FL 33301	☐ Remove
Vice Pres	Andrew Meran	201 E Las Olas Blvd, Suite 1900	☒ Add
		Fort Lauderdale, FL 33301	☐ Remove
Vice Pres	Conor Tamms	201 E Las Olas Blvd, Suite 1900	☒ Add
		Fort Lauderdale, FL 33301	☐ Remove
Vice Pres	David deVilliers, Jr.	201 E Las Olas Blvd, Suite 1900	☒ Add
		Fort Lauderdale, FL 33301	☐ Remove
Vice Pres	David deVilliers III	201 E Las Olas Blvd, Suite 1900	☒ Add
		Fort Lauderdale, FL 33301	☐ 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

Andrew Meran, Vice President

Typed or printed name of signee

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA

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

Item 8. Continued

<u>Title/Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Vice Pres.	Justin Dunn	201 E. Las Olas Blvd, Suite 1900 Fort Lauderdale, FL 33301	☒ Add ☐ Remove
Member	Davie Logistics Park Holdings, LLC	201 E. Las Olas Blvd, Suite 1900 Fort Lauderdale, FL 33301	☒ Add ☐ Remove

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