

Division of Corporations

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Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

L1600210250

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(((H17000253457 3)))



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To: Division of Corporations
 Fax Number : (950) 617-6383

From: Account Name : FOX ROTHSCHILD LLP
 Account Number : 120130000024
 Phone : (215) 299-2162
 Fax Number : (215) 299-2150

2017 SEP 27 AM 9:24
 J. HARRIS

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

Email Address: vlagana@foxrothschild.com

2017 SEP 27 AM 9:39
 J. HARRIS

TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
 VAULT HOLDINGS, LLC**

Certificate of Status	0
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FAX AUDIT #H17000253457 3

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VAULT HOLDINGS, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

VANESSA LAGANA

Name of Person

FOX ROTHSCHILD LLP

Firm/Company

2 S. BISCAYNE BLVD., SUITE 2750

Address

MIAMI, FLORIDA 33131

City/State and Zip Code

VLAGANA@FOXROTHSCHILD.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VANESSA LAGANA

305 442-6544

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee &
Certificate of Status

\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VAULT HOLDINGS, LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11/17/2016 and assigned Florida document number L16000210250

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

300 FIRST AVENUE SOUTH

SUITE 401

ST. PETERSBURG, FL 33701

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office 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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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
S	DANIEL ZHARKOVSKY	199 WATER STREET	<input type="checkbox"/> Add
		NEW YORK, NY 10038	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SCOTT CARMILANI	225 NE MIZNER BOULEVARD	<input checked="" type="checkbox"/> Add
		BOCA RATON, FL 33432	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	WESLEY DUPONT	199 WATER STREET	<input checked="" type="checkbox"/> Add
		NEW YORK, NY 10038	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CHARLES WILLIAMSON	199 WATER STREET	<input checked="" type="checkbox"/> Add
		NEW YORK, NY 10038	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	GORDON KNIGHT	225 NE MIZNER BOULEVARD	<input checked="" type="checkbox"/> Add
		BOCA RATON, FL 33432	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 FAX AUDIT #H170002534573

FAX AUDIT #HI70002534573

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

ARTICLE IV (Authorized Representatives) is hereby amended to read in its entirety as follows:

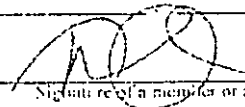
"The Company shall be deemed a "manager-managed" limited liability company within the meaning of the Florida Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The names and addresses of the managers are set forth herein."

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(a) The date specified in the record.
(b) The 90th day after the record is filed.

Dated SEPTEMBER 26 2017



Signature of a member or authorized representative of a member

Thomas J. Lagana

Typed or printed name of signer

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Filing Office