<u> 18100001011</u>

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G. MCLEOD

MAY 11 2009

EXAMINER



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DIVISION OF CORE OF 03

COVER LETTER

TO: Registrati Division	on Section of Corporations		
SUBJECT:	SFT LLC (Name of Foreign)	Limited Liability Compa	ny)
Dear Sir or Mada	um:		
The enclosed app	olication, certificate and fee(s)	are submitted for filing.	
Please return all	correspondence concerning thi	is matter to the following	;
Joseph	Name of Person)		
SFT	(Firm/Company)		
3068 H	(Address)		
Hudsonu	(City/State and Zip Code	(
For further inform	nation concerning this matter,	please call:	
Kent Be	Name of Person)	nt (<u>407</u>) <u>851-</u> (Area Code & Daytime T	Z 2 3 7 D Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a ch	eck for the following amoun	t:	
\$25 Filing Fee	\$30 Filing Fee & Certificate of Status	☐ \$55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

1.	Name of limited liability company as it appears on the records of the Florida Department of State:	
2.	Jurisdiction of its organization: OHana Conty, Muhusa	
3.	Date authorized to do business in Florida:	
	SECTION II (4-7 complete only the applicable changes)	
4.	If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization?	
5.	New name of the limited liability company: (must end with "Limited Liability Company, ""L.L.C.," or "LLC.")	
Èl th	f name unavailable, enter alternate name adopted for the purpose of transacting business in lorida and attach a copy of the written consent of the managers or managing members adopting e alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." "LLC.")	
6.	If the amendment changes the period of duration, indicate new period of duration:	DIVIS
7.	If the amendment changes the jurisdiction of organization, indicate new jurisdiction:	OR THE
8.	If the amendment corrects any false statement, indicate the statement being corrected and the correction:	
9.	Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisd under the law of which this entity is organized. Signature of a member or the authorized representative of a member Joseph Kouacs Typed or printed name of signee	iction

Filing Fee: \$25.00

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing
Members of SFT, LLC (Name of Limited Liability Company)
(Name of Limited Liability Company)
a limited liability company duly organized and existing under the laws of
(State or Country of Organization)
Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)
Date: 4-28-09
Signature(s) of Manager(s) and/or Managing Member(s):