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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

JUL 23 2014

T. HAMPTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SF Palm Beach, LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Abraham Shaulson

Name of Person

SF Palm Beach, LLC

Firm/Company

10800 Biscayne Boulevard, Suite 600

Address

Miami, FL 33161

City/State and Zip Code

exec.asst@millennium-mgt.com

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

For further information concerning this matter, please call:

Abraham Shaulson

Name of Person

at ( 305 ) 864-9191

Area Code & Daytime 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 check for the following amount:

\$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 CERTIFICATE OF AUTHORITY 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: SF PALM BEACH, LLC

2. Jurisdiction of its organization: Delaware

3. Date authorized to do business in Florida: 10/15/2012

SECTION II (4-7 complete only the applicable changes)

4. New name of the limited liability company: Same  
(must contain "Limited Liability Company," "L.L.C." or "LLC.")

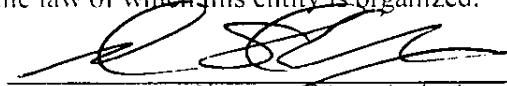
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:  
n/a

6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change: New Ownership/

Manager: A. Shaulson

7. Attached is an original 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

A. Shaulson

Typed or printed name of signee

Filing Fee: \$25.00

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TALLAHASSEE FLORIDA

# Delaware

PAGE 1

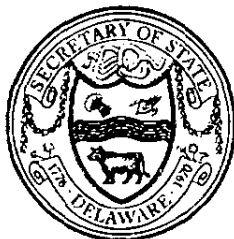
*The First State*


I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SF PALM BEACH, 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 EIGHTH DAY OF JULY, A.D. 2014.

5223795 8300

140929081

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 1517785

DATE: 07-08-14