Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)205-8842

Fax Number

: (850)878-5368

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

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN Z CAPITAL FLORIDA RESORT, LLC

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Corporate Filing Menu

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TO: Registration	Section				
Division of					
2 Capit	al Plorida Resort, LLC				
SUBJECT: Zeapin	Name of Foreign	Limited Lia	hility Com	nanv	
		· Dimiroc Cia	only com	pany	
Dear Sir or Madam:					
The enclosed applica	ation, certificate and fee(s) a	ire submitted	for filing.		
Please return all com	espondence concerning this	matter to the	following	Ç	
Matthew Kane					
	Name of Person		_		
Z Capital Partners, LU	c				
	Firm/Company		<del></del>		
1330 Avenue of the Ar	nericas, Suite (100				
	Address		<del></del>		
New York, NY 10019					
	City/State and Zip Code		_		
logul@zcap,net					
•	o be used for future annual	emost notific	ation)		
D-111111 dilgi (435. (4	o de daca foi fatare annual	report norme	4110117		
For further informat	ion concerning this matter, (	olease call:			
Matthew Kane	,	212	595-84(	00	
Nam	e of Person	Area Cod	e & Daytii	ne Telephone Number	
STREET/C	OURIER ADDRESS:		MAII	LING ADDRESS:	
Registration	<u> </u>	Registration Section			
Division of (		Division of Corporations			
Clifton Building			P.O. Box 6327		
2661 Executive Center Circle			Talishassee, Florida 32314		
Tallahassec,	Florida 32301				
	for the following amount		<b></b> -	C 0.00 PH: 5	
🗆 \$25 Filing Fee	□ \$30 Filing Fee &	S55 Fili		\$60 Filing Fee,	
	Certificate of Status	Certifica	і Сору	Certificate of Status	
				Certified Copy	

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

## SECTION 1 (1-4 must be completed)

Name of limited liability Company as it appears on the records of the Florida Department of  State: Z Capital Florida Resort, LLC
2. The Florida document number of this limited liability company is:
1. Jurisdiction of its organization:
4. Date authorized to do business in Florida:
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 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  F
Florida
Clay Zip Code Co
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 Replaced Agent
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

itle/ Capacity	<u>Name</u>	Address	Type of Action
Manuger	James J. Zenni, Jr.	Lake Forest, IL 6	∨qq
		Lake Foral, IL 6	OUT Remove
Manager	Andrei Scrivens	150 Field Drive, Suite 300	① Add
		Lake Forest, IL 60045	Remove
Manager	Neal Nath	150 Field Drive, Suite 300	<b> </b>
		Lake Forest, II. 60045	□ Removo
Manager Matthew Kane	150 Field Drive, Suite 300		
	Lake Forest, 1L 60045	Rêmave Z	
			Li Remove &
aforementi		more than 90 days old, evidencing the other intenticated by the official having custody entity is organized.	of records in the

Filing Fee: \$25.00