

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

M170001546413

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

From: Account Name : CAPITOL SERVICES, INC.  
 Account Number : 120160000017  
 Phone : (800) 345-4647  
 Fax Number : (800) 432-3622

2017 JUN - 8 A 11: 56  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

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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:** \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**  
**SFLC AMAZON, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

2017 JUN - 8 PM 4: 44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE  
 JUN 09 2017

**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: SFLC AMAZON, 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: M16000009114

3. Jurisdiction of its organization: DELAWARE

4. Date authorized to do business in Florida: NOVEMBER 14, 2016

**SECTION II (5-9 complete only the applicable changes)**

5. New name of the limited liability company: SFLC NILE, LLC  
(must contain "Limited Liability Company," "LLC," or "LLC.")

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

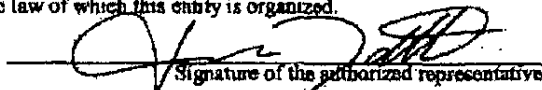
Title/Capacity	Name	Address	Type of Action
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

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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

Jonathan Tratt, Manager of Tratt Properties, LLC, its Manager

Typed or printed name of signee

Filing Fee: \$25.00


# Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "SFLC AMAEON, LLC", CHANGING ITS NAME FROM "SFLC AMAEON, LLC" TO "SFLC NILE, LLC", FILED IN THIS OFFICE ON THE SEVENTH DAY OF JUNE, A.D. 2017, AT 2:16 O'CLOCK P.M.



  
Jeffrey W. Bullock, Secretary of State

6168250 8100  
SR# 20174634707

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

Authentication: 202670630  
Date: 06-07-17

State of Delaware  
Secretary of State  
Division of Corporations  
Delivered 02:16 PM 06/07/2017  
FILED 02:16 PM 06/07/2017  
SR 20174634707 - File Number 6168250

**STATE OF DELAWARE**

**CERTIFICATE OF AMENDMENT**

1. The name of the limited liability company is SFLC AMAZON, LLC.
2. The Certificate of Formation of the limited liability company is hereby amended as follows:

**Paragraph 1 is deleted in its entirety and is replaced by the following new Paragraph 1:**

1. The name of the limited liability company is SFLC NILE, LLC.

**IN WITNESS WHEREOF**, the undersigned has executed this Certificate on the

28 day of April, 2017.

TRATT PROPERTIES, LLC, an Arizona  
limited liability company, its Manager

By:

  
Jonathan Tratt, Manager