

L17000261032

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

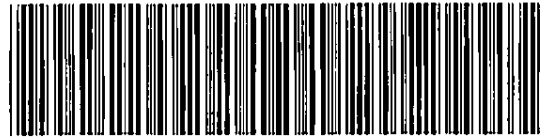
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Need Consent

Office Use Only



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MAY 16 PM 2:33

FILED

18 JUN - 1 AM 8:05

SECRETARY OF STATE
CLERK OF COURT

K. SALY

JUN 4 2018

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

WALK IN

PICK UP:

5/16

☐ **CERTIFIED COPY**

☒ **PHOTOCOPY**

☐ **CUS**

☒ **FILING**

Amend

1. Sofreh LLC
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 17, 2018

CORPORATE ACCESS, INC.

SUBJECT: SOFREH LLC
Ref. Number: L17000261032

RECEIVED
JUN 17 2018
18 JUN -1 PM 2:33

Corrected

We have received your document for SOFREH LLC and your check(s) totaling \$77.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

The document number of the name conflict is A17000000666 "SOFREH CAPITAL LP".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 518A00010270

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Sofreh 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:

Laura Willis
Name of Person

Perkins Coie LLP
Firm/Company

505 Howard Street, Suite 1000
Address

San Francisco, CA 94105
City/State and Zip Code

lwillis@perkinscoie.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Laura Willis at (415) 344-7024
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

**AFFIDAVIT REGARDING SOFREH CAPITAL LP
AND SOFREH CAPITAL LLC**

FILED
18 JUN -7 AM 8:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned hereby declares as follows:

1. On December 22, 2017, Articles of Organization were filed with the State of Florida to form Sofreh LLC, a Florida limited liability company (Florida Document Number L17000261032), and a Certificate of Limited Partnership was filed with the State of Florida to form Sofreh LP, a Florida limited partnership (Florida Document Number A17000000666).
2. On May 16, 2018, Articles of Amendment were filed with the State of Florida to request that the name of Sofreh LLC be changed to "Sofreh Capital LLC", and a Certificate of Amendment was filed with the State of Florida to request that the name of Sofreh LP be changed to "Sofreh Capital LP".
3. The State of Florida has accepted the request to change the name of Sofreh LP to Sofreh Capital LP (Letter Number 818A00010269), but rejected the request to change the name of Sofreh LLC to Sofreh Capital LLC (Letter Number 518A00010270), citing that the State requires an affidavit confirming that the principals of Sofreh Capital LP and Sofreh LLC are the same.
4. As requested, the undersigned declares that he owns a majority of the partnership units of Sofreh Capital LP and is the sole owner and manager of Sofreh LLC. Further, Sofreh LLC is the general partner of Sofreh Capital LP.
5. Declarant declares under penalty of perjury under the laws of the State of Florida that the foregoing is true and correct and that this declaration has been executed on May 30, 2018, at Bal Harbour, Florida.



Shervin Pishevar

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Sofreh LLC

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

FILED
18 JUN -1 AM 8:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on December 22, 2017 and assigned
Florida document number L17000261032.

This amendment is submitted to amend the following:

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

Sofreh Capital LLC

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)

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

City

Florida

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

If attending 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>
			<input type="checkbox"/> Add
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18 JUN - 1 AM 8:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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18 JUN -1 AM
SECRETARY OF STATE
WASHINGTON, D.C.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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.

Dated May 14, 2018



Signature of a member or authorized representative of a member

Shervin Pishevar, Manager
Typed or printed name of signee