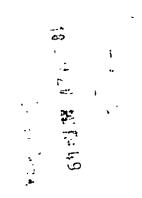
M6000001913

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
	_	_
☐ PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



400315036554



JUN 28 2018



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 3230 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 275909 4361510
AUTHORIZATION :
COST LIMIT : \$\25.00
ORDER DATE : June 26, 2018
ORDER TIME : 2:29 PM
ORDER NO. : 275909-020
CUSTOMER NO: 4361510
FOREIGN FILINGS
NAME: COLONY NORTHSTAR ADVISORS LLC
CORPORATE LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY
XXXX AMENDMENT
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Emily Croft EXT# 62925

EXAMINER:

COVER LETTER

	stration S sion of Co	ection orporations			
SUBJECT:	Colo	ny NorthStar A	dvisors, L	LC _	
		Name of Foreign	n Limited Liabi	lity Compa	ny
Dear Sir or N	Madam:				
The enclosed	d applicat	on, certificate and fee(s)	are submitted fo	or filing.	
Please return	all corre	spondence concerning thi	s matter to the f	ollowing:	
Directo	r of L	egal			
	-	Name of Person		•	
Colony	Capi	tal, Inc.			
		Firm/Company		•	
515 S.	Flowe	er St. 44th Fl			
		Address		•	
Los An	geles	, CA 90071			
		City/State and Zip Code		•	
lboden	stein@	clns.com			
E-mail ad	dress: (to	be used for future annual	report notificat	ion)	
For further i	nformatic	n concerning this matter,	please call:		
Linda E				, 552-7	7180
	Name	of Person		& Daytime	Telephone Number
		URIER ADDRESS:			NG ADDRESS:
-	istration S	ection orporations		-	ition Section of Corporations
	ton Buildi	•		P.O. Bo	•
2661	l Executiv	re Center Circle Torida 32301		Tallahas	ssee, Florida 32314
Enclosed is		or the following amount	t: S55 Filir	ng Fee &	S60 Filing Fce,
	o **	Certificate of Status	Certified	_	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 (1-4 must be completed)

. Name of limited liability Company as it appears on the records of the Florida Department of
State: Colony NorthStar Advisors, 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: M0000001913
Jurisdiction of its organization: Delaware
Date authorized to do business in Florida: 09/18/2000
SECTION II (5-9 complete only the applicable changes)
5. New name of the limited liability company: Colony Capital Advisors, LLC (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 nust contain "Limited Liability Company," "L.L.C." or "LLC.")
5. 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 the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:				
le/ <u>Capacity</u>	<u>Name</u>	Address	Type of Action	
			Remo	
 .			Add	
			Remo	
			° oź —	
			Remo	
			Add Add	
			Add	
			Remo	
aforementions	certificate, if required: no more than 90 and amendment(s), duly authenticated by inder the law of which this entity is organ Signature of Jenny Neslin	the official having custody of recor	ds in the	

Filing Fee: \$25.00

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "COLONY NORTHSTAR ADVISORS, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "COLONY CAPITAL ADVISORS, LLC" ON THE TWENTY-FIFTH DAY OF JUNE, A.D. 2018, AT 4:34 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COLONY CAPITAL ADVISORS, LLC" WAS FORMED ON THE ELEVENTH DAY OF SEPTEMBER, A.D. 1991.



Authentication: 202966280

Date: 06-27-18