

| (Red                      | questor's Name)   |           |
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| (City                     | //State/Zip/Phone | #)        |
| PICK-UP                   | WAIT              | MAIL      |
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| (Doc                      | cument Number)    |           |
| Certified Copies          | Certificates      | of Status |
| Special Instructions to f | Filing Officer:   |           |
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Office Use Only



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SECRETARY OF STATE AND SECRETARY OF STATE AND SECRETARY OF STATE OF STATE AND SECRETARY OF STATE OF ST

JAN 24 2017 S. YOUNG



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

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| ACCOUNT NO. : 12000000195   |   |
|---|---|
| REFERENCE : 453152 7924764  |   |
| AUTHORIZATION : Conello Blanca                                      |   |
| COST LIMIT : \$\frac{25.00}{25.00}                                  |   |
|   |   |
| ORDER DATE : January 9, 2017  | <u>ب</u> ــــــــــــــــــــــــــــــــــــ |
| ORDER TIME : 1:40 PM  | 7   |
| ORDER NO. : 453152-005  | JAN 23  |
| CUSTOMER NO: 7924764  | HI  |
|   | بب  |
| FOREIGN FILINGS   | 4   |
|   |   |
| NAME: TOYAN ENTERPRISES, 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: Courtney Williams EXT# 62935                        |   |

EXAMINER:

# 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)

| I. Name of limited liability Company as it appears   | s on the records of the Florida Department of   |         |
|--|---|---------|
| State: Toyan Enterprises, LLC  | •   |         |
| Enter new principal office address, if applicable:   | 700 Universe Blvd.  |         |
| (Principal office address MUST BE A STREET ADDRESS)  | Attn: Corp. Gov.  |         |
|  | Juno Beach, FL 33408  |         |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)   |   |         |
| 2. The Florida document number of this limited lia   | ability company is: M05000006021  |         |
| 3. Jurisdiction of its organization: California  | ω<br>   |         |
| 4. Date authorized to do business in Florida: Oc   |   |         |
| SECTION II (5-9 complete only the applicable   | changes)  | <u></u> |
| 5. New name of the limited liability company: (mus   | st contain "Limited Liability Company," "L.L.C.," or "LLC.")  |         |
| (If name unavailable, enter alternate name adopted copy of the written consent of the managers or man must contain "Limited Liability Company," "L.L.C | d for the purpose of transacting business in Florida and attach a maging members adopting the alternate name. The alternate name C." or "LLC.")   |         |
| 6. If amending the registered agent and/or registered registered agent and/or the new registered office ac   | ed officer address on our records, enter the name of the new ddress here:   |         |
| Name of New Registered Agent:  |   |         |
| New Registered Office Address:   | Enter Florida Street Address  |         |
|  | Florida   |         |
| <del></del>  | City Zip Code   |         |
| the provisions of all statutes relative to the proper<br>and accept the obligations of my position as regist   | ent and agree to act in this capacity. I further agree to comply with<br>and complete performance of my duties, and I am familiar with<br>tered agent as provided for in Chapter 605, F.S. Or, if this<br>in the registered office address, I hereby confirm that the limited |         |

| 8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change: |                                       |   |                     |  |
|---|---------------------------------------|---|---------------------|--|
| e/ Capacity   | <u>Name</u>                           | . Address                                     | Type of Action      |  |
|   | · · · · · · · · · · · · · · · · · · · |   | Add                 |  |
|   |                                       |   | Remove              |  |
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| forementioned an  | the law of which this entity is organ | the official having custody of records in the | Remo                |  |

Typed or printed name of signee

## State of California

### Secretary of State

### **Certificate of Status**

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

That on the 20th day of December, 2016, there was filed in this office a document converting TOYAN ENTERPRISES, LLC, a California Limited Liability Company, into a Delaware Limited Liability Company.

That according to our records said converting California Limited Liability Company is converted-out on our records.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of January 20, 2017.



ALEX PADILLA Secretary of State