Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document,

(((H16000023464 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. .

Tc:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BROAD AND CASSEL (BOCA RATON)

Account Number: 076376001555

Fax Number

: (561)483-7000 : (561)483-7321

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

Email Address:

jasonmccoy@paulhastings.com

#### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN EQR-KINGS COLONY, L.L.C.

Certificate of Status Certified Copy 0 Page Count Estimated Charge S30.00

FEB 01 2016

Electronic Filing Menu

Corporate Filing Menu

S. YOUNG

Fax Audit No. H16000023464 3

#### COVER LETTER

TO: Registration Section

Division of Corporations SUBJECT: EQR-Kings Colony, L.L.C. Name Change Name of Foreign Limited Liability Company Dear Sir or Madam: The enclosed application, certificate and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Jason McCoy Name of Person Paul Hastings Firm/Company

1170 Peachtree St. NE, Suite 100

Address

Atlanta, Georgia, 30309

City/State and Zip Code

jasonmccoy@paulhastings.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jason McCov

Area Code & Daytime Telephone Number Name of Person

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

**MAILING ADDRESS:** 

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee S30 Filing Fee &

Certificate of Status

\$55 Filing Fee & Certified Copy

☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E055 (9/15)

Fax Audit No. H16000023464 3

## 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 appear	s on the records of the Florida Department of			
State: EQR-Kings Colony, L.L.C.	FOR Mont Dutage Avenue			
Enter new principal office address, if applicable:	591 West Putnam Avenue			
(Principal office address • MUST BE A STREET ADDRESS)	Greenwich, Connecticut 06830			
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: M06000003364			
3. Jurisdiction of its organization: Delaware				
Date authorized to do business in Florida: June 15, 2006  SECTION II (5-9 complete only the applicable changes)  SCG Atlas Kings Colony, L.L.C.  (must contain "Limited Liability Company," "LLC." or "LLC.")				
	SCG Atlas Kings Colony, L.L.C. 复声 易			
(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 mamust 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 registere registered agent and/or the new registered office agent.	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			
<del></del> -	, Florida			
	City Zip Code			
the provisions of all statutes relative to the proper and accept the obligations of my position as regist	ent and agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar with tered agent as provided for in Chapter 605, F.S. Or, if this in the registered office address, I hereby confirm that the limited			

#### Fax Audit No. H16000023464 3

e/ Capacity	<u>Name</u>	<u>Address</u>	Type of Acti
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forementioned am-	cate, if required: no more than 90 endment(s), duly authenticated by ne law of which this entity is organ	the official having custody of record	Remo

Filing Fee: \$25.00

### Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SCG ATLAS KINGS COLONY, L.L.C." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF JANUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4175246 8300 SR# 20160399278

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 201728812

Date: 01-26-16

# Delaware The First State

Page 1

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 "EQR-KINGS COLONY, L.L.C.", CHANGING ITS NAME FROM "EQR-KINGS COLONY, L.L.C." TO "SCG ATLAS KINGS COLONY, L.L.C.", FILED IN THIS OFFICE ON THE TWENTY-SIXTH DAY OF JANUARY, A.D. 2016, AT 9:17 O'CLOCK A.M.

FILED

16 JAN 29 AN II: 05

SECRETATION STATE

Authentication: 201727520 Date: 01-26-16

4175246 8100 \$R# 20160392452

You may verify this certificate online at corp.delaware.gov/authver.shtml

## STATE OF DELAWARE CERTIFICATE OF AMENDMENT

to SCG Atlas			<u> </u>	inged
	Kings Colony, L.	L.C.		
	HEREOF, the undersign		this Certifi	cate on
he <u>26</u>	day of January		_, A.D. <u>20</u>	16
				22-7