M06000005587

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Grynoutorziph Horie n)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Anend
Special Instructions to Filing Officer:
Malkely
V





800250064978

08/21/13--01010--004 **55.00

SUFFICIENCY OF FILING

2013 AUG 21 AM 9: 05

J. SAULSBERRY EXAMINER

AUG 22 2013

FLORIDA RESEARCH & FILING SERVICES, INC. . 1211 CIRCLE DRIVE TALLAHASSEE, FL 32301 PHONE (850)364-8000

OFFICE USE ONLY

WALK-IN

ENTITY NAME:

MATHESON RILEY LLC

CK# 6067 FOR \$ 55.00

PLEASE FILE THE ATTACHED AMENDMENT & RETURN THE FOLLOWING:

XXX CERTIFIED COPY STAMPED COPY CERTIFICATE OF STATUS

Examiner's Initials

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

1.	Name of limited liability company as it appears on the records of the Florida Department of State: ZL MATHESON LLC
2.	Jurisdiction of its organization: Delaware
3.	Date authorized to do business in Florida: October 10, 2006
	SECTION II (4-7 complete only the applicable changes)
4.	If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? August 12th, 2013
5.	New name of the limited liability company: Matheson Riley LLC (must end with "Limited Liability Company," "L.L.C.," or "LLC.")
Èl the	Fname unavailable, enter alternate name adopted for the purpose of transacting business in orida and attach a copy of the written consent of the managers or managing members adopting a alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." LC."
	If the amendment changes the period of duration, indicate new period of duration:
7.	If the amendment changes the jurisdiction of organization, indicate new jurisdiction:
8.	If the amendment corrects any false statement, indicate the statement being corrected and the correction:
9.	Attached is an original certificate, 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.

Filing Fee: \$25.00

Robert A. Stamen, Authorized Representative

Typed or printed name of signee

Signature of a member or the authorized representative of a member

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 "ZL MATHESON LLC", CHANGING ITS NAME FROM "ZL MATHESON LLC" TO "MATHESON RILEY LLC", FILED IN THIS OFFICE ON THE TWELFTH DAY OF AUGUST, A.D. 2013, AT 12:45 O'CLOCK P.M.

2013 AUG 21 AM 9: 05

3664385 8100

130978324

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

Jeffrey W. Bullock, Secretary of Stat

AUTHENTACATION: 0658583

DATE: 08-12-13

State of Delaware FILED 12:45 PM 08/12/2013 NV 130978324 - 3664385 FIL

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF FORMATION

OF

ZL MATHESON LLC

ZL MATHESON LLC (hereinafter called the "Company"), a limited liability company organized and existing under and by virtue of the Limited Liability Company Act of the State of Delaware, does hereby certify:

- 1. The name of the limited liability company is ZL MATHESON LLC.
- 2. The certificate of formation of the company is hereby amended by striking out Article First thereof and by substituting in lieu of said Article the following new Article First:

"The name of the limited liability company is MATHESON RILEY LLC"

Executed on this 12 th day of August

Name: Dr. Lindsey Matheson

Title: Authorized Person