

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.

(((H16000023479 3)))



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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : BROAD AND CASSEL (BOCA RATON)
Account Number : 076376001555
Phone : (561) 483-7000
Fax Number : (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

2016 JAN 29 AM 09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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RECEIVED
2016 JAN 29 AM 11:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
EQR-MIRAMAR LAKES, L.L.C.**

Certificate of Status	1
Certified Copy	0
Page Count	7
Estimated Charge	\$30.00

FEB 01 2016
D. BRUCE

Fax Audit No. H16000023479 3

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EQR-Miramar Lakes, 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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 JAN 29 A 10:08

FILED

For further information concerning this matter, please call:

Jason McCoy

Name of Person

at (404) 8152318

Area Code & Daytime Telephone Number

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

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

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

CR2B055 (9/15)

Fax Audit No. H16000023479 3

Fax Audit No. H16000023479 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 appears on the records of the Florida Department of

State: EQR-Miramar Lakes, L.L.C.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 liability company is: M060000071623. Jurisdiction of its organization: Delaware4. Date authorized to do business in Florida: December 27, 2006

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: SCG Atlas Miramar Lakes, L.L.C.
(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 must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. 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 Changing Registered Agent, Signature of New Registered Agent

Fax Audit No. H16000023479 3

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

9. Attached is a certificate, if required: 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.

/s/ Jerome C. Silvey

Signature of the authorized representative

Jerome C. Silvey

Typed or printed name of signee

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 MIRAMAR LAKES, 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.

FILED

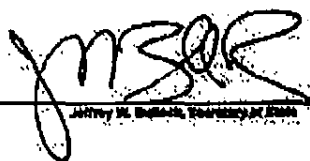
2016 JAN 29 A 10:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



4268583 8300

SR# 20160399243

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


Jeffrey W. Bullock, Secretary of State

Authentication: 201728804

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-MIRAMAR LAKES,
L.L.C.", CHANGING ITS NAME FROM "EQR-MIRAMAR LAKES, L.L.C." TO
"SCG ATLAS MIRAMAR LAKES, L.L.C.", FILED IN THIS OFFICE ON THE
TWENTY-SIXTH DAY OF JANUARY, A.D. 2016, AT 8:58 O'CLOCK A.M.

FILED

2016 JAN 29 A 10:08
SECRETARY OF STATE
HALLAMSBIE, FLORIDA



4268583 8100
SR# 20160392443

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


Jeffrey W. Bullock, Secretary of State

Authentication: 201727344
Date: 01-26-16

State of Delaware
Secretary of State
Division of Corporations
Delivered 08:58 AM 01/26/2016
FILED 08:58 AM 01/26/2016
SR 20160392443 - FileNumber 4268583

**STATE OF DELAWARE
CERTIFICATE OF AMENDMENT**

1. Name of Limited Liability Company: EQR-Miramar Lakes, L.L.C.

2. The Certificate of Formation of the limited liability company is hereby amended as follows:

The name of the limited liability company is changed to SCG Atlas Miramar Lakes, L.L.C.

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the 26 day of January, A.D. 2016.

By: /s/ Jerome C. Silvey

Authorized Person(s)

Name: Jerome C. Silvey

Print or Type