# Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H16000023436 3)))



H160000234383ABCZ

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BROAD AND CASSEL (BOCA RATON)

Account Number: 076376001555 : (561)483-7000

: (561)483-7321 Fax Number

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

jasonmccoy@paulhastings.com Emmil Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN EQR-BAYVIEW, LLC

Certificate of Status	0
Certified Copy	0
Page Count	
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

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FEB 0 1 2016

Fax Audit No. H16000023436 3

# **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: EQR-Bayview, LLC   Name of Foreign	Vame Change Limited Liability Company
Dear Sir or Madam;	
The enclosed application, certificate and fee(s) as	re 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, St	uite 100
Address	
Atlanta, Georgia 30309	
City/State and Zip Code	<del></del>
jasonmccoy@paulhasting E-mail address: (to be used for future annual r	
For further information concerning this matter, p	lease call:
	Area Code & Daytime Telephone Number
Name of Person	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  CR2E055 (9/15)	S55 Filing Fee & S60 Filing Fee, Certified Copy Certificate of Status & Certified Copy
CHEBOTO (2/10)	

#### Fax Audit No. H16000023436 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)

Name of limited liability Company as it appears     State: EQR-Bayview, LLC	s on the records of the Florida Department of
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)	CRETARY OF STATE OR IN THE SEE FLORIS
2. The Florida document number of this limited lie	ability company is: M10000005794
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L. 6.  6. If amending the registered agent and/or registered agent and/or the new registered office a	changes) CG Atlas Bayview Owner, L.L.C. St contain "Limited Liability Company," "L.L.C.," or "LLC.")  If for the purpose of transacting business in Florida and attach a maging members adopting the alternate name. The alternate name C." or "LLC.")  ed officer address on our records, enter the name of the new
Name of New Registered Agent.	
New Registered Office Address:	Enter Florida Street Address
	, Florida
	City Zip Code
the provisions of all statutes relative to the proper and accept the obligations of my position as regis	nt 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
- If C	Changing Registered Agent, Signature of New Registered Agent

### Fax Audit No. H16000023436 3

. If the amendment c	hanges person, title or capacity in	accordance with 605,0902 (1)(e), ind	licate that change:
itle/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action
			DAdd
			Remove
<del></del>		<del>-</del>	Add
			Remove
			Add
			Remove
		<del></del>	Add
			Remove
			Add
			Remove
aforementioned am	icate, if required: no more than 9 tendment(s), duly authenticated b he law of which this entity is org	y the official having custody of reco	rdsinttle
	/s/ Jero	me C. Silvey	JAN 29 ARETARY
		C. Silvey	
		inted name of signee	STATE 4 46

# Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SCG ATLAS BAYVIEW OWNER, 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.

Authentication: 201728793

Date: 01-26-16

4918921 8300 SR# 20160399226

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

# 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-BAYVIEW, LLC", CHANGING ITS NAME FROM "EQR-BAYVIEW, LLC" TO "SCG ATLAS BAYVIEW OWNER, L.L.C.", FILED IN THIS OFFICE ON THE TWENTY-SIXTH DAY OF JANUARY, A.D. 2016, AT 8:43 O'CLOCK A.M.



Authentication: 201727248 Date: 01-26-16

4918921 8100 SR# 20160392434

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

State of Delaware
Secretary of State
Division of Corporations
Delivered 08:43 AM 01/26/2016
FILED 05:43 AM 01/26/2016
SR 20160392434 - File Number 4918921

# STATE OF DELAWARE CERTIFICATE OF AMENDMENT

to SCG Atlas Bayview Owner, L.L.C.	
(	
IN WITNESS WHEREOF, the undersigned have ex	
the 26 day of January	, A.D. <u>2016</u>