

**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

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To:

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

RE-SUBMIT

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

Please attach original filing
date of submission 11/4

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

Email Address: _____

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14 NOV -5 AM 10:00

DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
643 DEBT FUND I LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03 05
Estimated Charge	\$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 NOV -4 PM 12:25

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Electronic Filing Menu

Corporate Filing Menu

Help NOV -5 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dwell Bridge Fund I LLC
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:

Gregor Watson
Name of Person

Dwell Bridge Fund I LLC
Firm/Company

445 Bush Street, Suite #700
Address

San Francisco, California 94108
City/State and Zip Code

Info@licensandcomplianceresource.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

_____ at (_____) _____
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 ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E055 (12/13)

11/5/2014 13:10:20 From: To: 8506176383

(2/7)

850-617-6381

11/5/2014 12:00:15 PM PAGE 1/001 Fax Server



November 5, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYTSTEM

RE-SUBMIT

SUBJECT: 643 DEBT FUND I LLC
REF: H14000257373

Please return original filing
date of submission 11/4

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Elliott R McCaskill
Registration Specialist II

FAX Aud. #: H14000257373
Letter Number: 314A00023670

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BUREAU OF COMMERCIAL
INFORMATION SERVICES

P.O BOX 6327 - Tallahassee, Florida 32314

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY 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: 643 Debt Fund I LLC
2. Jurisdiction of its organization: California
3. Date authorized to do business in Florida: 01/27/2012

SECTION II (4-7 complete only the applicable changes)

4. New name of the limited liability company: Dwell Bridge Fund I LLC
(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.")

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

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

7. Attached is an original 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.

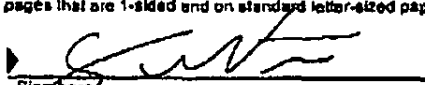

Signature of the authorized representative

Gregor Watson

Typed or printed name of signee

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA

LLC-2	Amendment to Articles of Organization of a Limited Liability Company (LLC)
<p>To change information of record for your California LLC, you can fill out this form, and submit for filing along with:</p> <ul style="list-style-type: none"> - A \$30 filing fee. - A separate, non-refundable \$15 service fee also must be included, if you drop off the completed form. - To file this form, the status of your LLC must be active on the records of the California Secretary of State, or if suspended, this form can only be filed to list a new LLC name. To check the status of the LLC, go to kepler.sos.ca.gov. <p>Important! To change the LLC addresses, or to change the name or address of the LLC's agent for service of process, you must file a Statement of Information (Form LLC-12). To get Form LLC-12, go to www.sos.ca.gov/business/be/statements.htm.</p> <p>Items 4-6: Only fill out the information that is changing. Attach extra pages if you need more space or need to include any other matters.</p>	
<p>For questions about this form, go to www.sos.ca.gov/business/be/filing-tips.htm.</p>	
<p>① LLC's Exact Name (on file with CA Secretary of State)</p> <p style="border: 1px solid black; padding: 5px; margin: 5px;">843 Debt Fund I LLC</p>	<p>② LLC File No. (issued by CA Secretary of State)</p> <p style="border: 1px solid black; padding: 5px; margin: 5px;">201036310224</p>
<p>Purpose</p> <p>③ The purpose of the limited liability company is to engage in any lawful act or activity for which a limited liability company may be organized under the California Revised Uniform Limited Liability Company Act.</p>	
<p>Now LLC Name (List the proposed LLC name exactly as it is to appear on the records of the California Secretary of State.)</p> <p>④ <u>Dwell Bridge Fund I LLC</u></p> <p style="font-size: small;">Proposed LLC Name The proposed new name must include: LLC, L.L.C., Limited Liability Company, Limited Liability Co., Ltd. Liability Co. or Ltd. Liability Company, and may not include: bank, trust, trustee, incorporated, inc., corporation, or corp., insurer, or insurance company.</p>	
<p>Management (Check only one.)</p> <p>⑤ The LLC will be managed by:</p> <p style="text-align: center;"> <input type="checkbox"/> One Manager <input type="checkbox"/> More Than One Manager <input type="checkbox"/> All Limited Liability Company Member(s) </p>	
<p>Amendment to Text of the Articles of Organization (List both the current text, and the text as amended by this filing.)</p> <p>⑥</p>	
<p>Read and sign below: Unless a greater number is provided for in the Articles of Organization, this form must be signed by at least one manager, if the LLC is manager-managed or at least one member, if the LLC is member-managed. If the signing manager or member is a trust or another entity, go to www.sos.ca.gov/business/be/filing-tips.htm for more information. If you need more space, attach extra pages that are 1-sided and on standard letter-sized paper (8 1/2" x 11"). All attachments are part of this document.</p>	
<p> _____ * Manager of 843 Debt Finance, LLC, Manager</p>	<p style="text-align: center;">Gregor Watson* _____ Print your name here</p>
<p style="text-align: right;">Manager _____ Your business title</p>	
<p>Make check/money order payable to: Secretary of State</p> <p>Upon filing, we will return one (1) uncertified copy of your filed document for free, and will certify the copy upon request and payment of a \$5 certification fee.</p>	
<p>By Mail</p> <p>Secretary of State Business Entities, P.O. Box 944228 Sacramento, CA 94244-2200</p>	<p>Drop-Off</p> <p>Secretary of State 1500 11th Street, 3rd Floor Sacramento, CA 95814</p>

FILED
 Secretary of State
 State of California
 SEP 15 2014

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 ALLIANCE, FLORIDA
 14 NOV - 4 PM : 25
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11/5/2014 13:10:20 From: To: 8506176383

(6/7)

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TALLAHASSEE, FLORIDA



I hereby certify that the foregoing
transcript of _____ (page(s))
is a full, true and correct copy of the
original record in the custody of the
Florida Secretary of State's office.

OCT 10 2014

Date: _____ *Sh*

Debra Bowen
DEBRA BOWEN, Secretary of State

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: DWELL BRIDGE FUND I LLC

FILE NUMBER: 201036310224
FORMATION DATE: 12/22/2010
TYPE: DOMESTIC LIMITED LIABILITY COMPANY
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

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TALLAHASSEE, FLORIDA

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of California this
day of October 7, 2014.

Debra Bowen

DEBRA BOWEN
Secretary of State