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CFI COUNTRYSIDE LLC

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12/10/2015

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	rs on the records of the Florida Department of	
State: CFI COUNTRYSIDE LLC		·
Enter new principal office address, if applicable:	4956 North 300 West, Suite 300	
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)	Provo, Utah 84604	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4956 North 300 West, Suite 300	
	Provo, Utah 84604	
2. The Florida document number of this limited lia	ability company is: M130(XXX)[[]	203_
3. Jurisdiction of its organization: Delaware	TA	22
4. Date authorized to do business in Florida: 9/20	D/2013	C 등 등 기
SECTION II (5-9 complete only the applicable o	changes)	
New name of the limited liability company: P((must	C Countryside, LLC	Tor "D.C.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or man must contain "Limited Liability Company," "L.L.C.	naging members adopting the alternate name. The	ia and attach a e alternate name
If amending the registered agent and/or registere registered agent and/or the new registered office ad	d officer address on our records, enter the name ddress here:	of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida Street Address	ę*
	2	
	City	ip Code
New Registered Agent's Signature, if changing Registered Agent's Agent as registered agent	gistered Agent: Of and agree to act in this capacity. I further agre	ee to comply with

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.

12/10/2015 2:12:39 PM From: To: 8506176383(3/4) 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: Title/ Capacity Type of Action Name Address \square Add Remove Remove Remove ☐ Add 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 the sentity is organized.

Typed or printed name of signee

J. Matthew Clarke

Signature of the authorized representative

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "CFI COUNTRYSIDE LLC",

FILED A RESTATED CERTIFICATE, CHANGING ITS NAME TO "PC

COUNTRYSIDE, LLC" ON THE FOURTH DAY OF DECEMBER, A.D. 2015, AT

1:44 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID RESTATED CERTIFICATE IS THE TENTH DAY OF DECEMBER, A.D. 2015.

SECRETARY OF STATE



5398935 8320 SR# 20151281335 Authentication: 10585094

Date: 12-10-15

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