Division of Corporations

Page 1 of 2



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.

(((H14000189923 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

: TRIAD PROFESSIONAL SERVICES, LLC Account Name

Account Number : 120020000094 Phone : (770)777-2091 Fax Number : (770)220~1943

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

Email Address:

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ISIS HOUSE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

Electronic Filing Menu

Corporate Filing Menu

Help

#### **COVER LETTER**

TO:	Registration Section Division of Corpora				
SUBJI	ECT: ISIS HC	USE, LLC			
		Name of Foreign	Limited Liab	ility Com	pany
Dear S	ir or Madam:				
The en	closed application, c	ertificate and fee(s) as	re submitted f	or filing,	
Please	return all correspond	lence concerning this	matter to the	following	:
Sha	ron K. Gray				
	Nar	ne of Person	-	-	
Tria	d Profession	nal Services,	LLÇ		
		n/Company	·	•	
172	0 Windward	Concourse,	Ste. 390		
		Address		-	
Alpl	naretta, GA	30005			
	City	/State and Zip Code		=	
F-m	ail address: (to be us	ed for future annual re	eport notificat	ion)	
For fur	ther information con	cerning this matter, pl	lease cali:		
Sha	ron K. Gray		.,770	, 777-	2091
	Name of Pe	rson	* *************************************	<del></del>	ne Telephone Number
	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Con Tallahassee, Florida	tions ter Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
<b>□</b> \$25		following amount: 10 Filing Fee & ertificate of Status	S55 Filing Cortified C		☐ \$60 Filing Fee, Certificate of Status & Certified Copy



August 13, 2014

#### FLORIDA DEPARTMENT OF STATE

TRIAD PROFESSIONAL SERVICES, LLC Division of Corporations

SUBJECT: ISIS HOUSE, LLC

REF: M14000005414

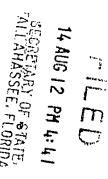
We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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. (0097)

Elliott R McCaskill Registration Specialist II FAX Aud. #: H14000189923 Letter Number: 214A00017347



## 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: ISIS HOUSE, LLC
2.	Jurisdiction of its organization: Delaware
3.	Date authorized to do business in Florida: 07/30/2014
SI	ECTION II (4-7 complete only the applicable changes)
4.	New name of the limited liability company:    PEARL HOUSE, LLC
FI	name 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 alternate name. The alternate name must contain "Limited Liability Company," "L.L.C."
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: Management of the company is hereby amended to replace current management with
th	e following: Septaria Management, LLC (MGR), 9705 Collins Avenue, Apt. 1204N, Miami. FL 33154
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.  Significate of the authorized representative
	سن الله كان المحالية
	Steve Bassin
	Typed or printed name of signee
	Filing Fee: \$25.00 SEE OF FL

State of Delaware Secretary of State Division of Corporations Delivered 05:30 PM 08/07/2014 FILED 05:23 PM 08/07/2014 SRV 141048785 - 5577313 FILE

#### CERTIFICATE OF AMENDMENT

#### TO CERTIFICATE OF FORMATION

OF

#### ISIS HOUSE, LLC

ISIS House, 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 ISIS House, LLC.
- 2. The Certificate of Formation of the Company is hereby amended by striking out Article 1 thereof and by substituting in lieu of said Article 1 the following new Article 1:

The name of the limited liability company is Pearl House, LLC.

Executed on this 7th day of August, 2014.

/s/ Steve Bassin

Steve Bassin, Authorized Person

Delaware Domestic Limited Liability Company
Centificate of Amendment 1/96 - 1

# Delaware

PAGE 3

## 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 "ISIS HOUSE, LLC",
CHANGING ITS NAME FROM "ISIS HOUSE, LLC" TO "PEARL HOUSE, LLC",
FILED IN THIS OFFICE ON THE SEVENTH DAY OF AUGUST, A.D. 2014, AT
5:23 O'CLOCK P.M.

SECRETARY OF STATE ALL AHASSEE FI OBIN

5577313 8100

141048785

AUTHENTY CATION: 1606566

DATE: 08-08-14

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