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2015 JAN -2 PM 4: 18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER
JAN -1 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RST Coral Ridge Housing, 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:

Leah Williams

Name of Person

Pillar Income Asset Management, Inc.

Firm/Company

1603 LBJ Freeway, Suite 800

Address

Dallas, Texas 75234

City/State and Zip Code

leah.williams@pillarincome.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leah Williams

Name of Person

at (469) 522-4374

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

**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: RST Coral Ridge Housing, LLC
2. Jurisdiction of its organization: Nevada
3. Date authorized to do business in Florida: 12/02/2014

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TALLAHASSEE, FLORIDA

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

4. New name of the limited liability company: RST CR Housing, 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

Clifton E. Phillips, President of Managing Member

Typed or printed name of signee

Filing Fee: \$25.00

SECRETARY OF STATE




CERTIFICATE OF NAME CHANGE

I, ROSS MILLER, the duly qualified and elected Nevada Secretary of State, do hereby certify that on December 11, 2014, a Certificate of Amendment to its Articles of Organization changing the name to **RST CR HOUSING, LLC**, was filed in this office by **RST CORAL RIDGE HOUSING, LLC**. Said change of name has been made in accordance with the laws of the State of Nevada and that said Certificate of Amendment is now on file and of record in this office.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on December 30, 2014.


ROSS MILLER
Secretary of State

Certified By: Christine Rakow
Certificate Number: C20141230-3175
You may verify this certificate
online at <http://www.nvsos.gov/>