

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383 •

From: Account Name : AKERMAN, LLP - JACKSONVILLE
Account Number : 105543000740
Phone : (904) 798-3700
Fax Number : (904) 798-3730

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

Email Address: akaplan@banyaninvestors.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SEVEN BRIDGES SUPPLY LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

RECEIVED
2017 AUG 14 PM 3:12
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TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

7 SIMMONS

AUG 15 2017

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Corporate Filing Menu

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SEVEN BRIDGES SUPPLY 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:

Robert A. Leapley, Jr., Esq.

Name of Person

Akerman LLP

Firm/Company

50 North Laura Street, Suite 3100

Address

Jacksonville, FL 32202

City/State and Zip Code

akaplan@banyaninvestors.com

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

For further information concerning this matter, please call:

Robert A. Leapley, Jr., Esq. at (904) 798-3700

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 (9/15)

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**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 appears on the records of the Florida Department of

State: SEVEN BRIDGES SUPPLY LLC

Enter new principal office address, if applicable: 1111 Brickell Avenue - Suite 1300

(Principal office address)

MUST BE A STREET ADDRESS

Miami, FL 33131

Enter new mailing address, if applicable:

(Mailing address)

MAY BE A POST OFFICE BOX

1111 Brickell Avenue - Suite 1300

Miami, FL 33131

2. The Florida document number of this limited liability company is: M15000003052

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: April 22, 2015

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: SBSWU, 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.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida Street Address

Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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.

If Changing Registered Agent, Signature of New Registered Agent

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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:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Add
_____	_____	_____	☐ 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 this entity is organized.

Signature of the authorized representative

Adam Kaplan, Authorized Representative

Typed or printed name of signee

Filing Fee: \$25.00

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FILED
AUG 14 2017
11:10:48
CLERK OF DISTRICT COURT
JUDICIAL DISTRICT NO. 1
DENVER, COLORADO

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State of Delaware
Secretary of State
Division of Corporations
Delivered 04:59 PM 07/31/2017
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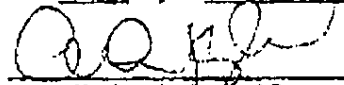
**CERTIFICATE OF AMENDMENT TO CERTIFICATE OF FORMATION
OF
SEVEN BRIDGES SUPPLY LLC**

Seven Bridges Supply 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 SEVEN BRIDGES SUPPLY LLC.
2. The certificate of formation of the Company is hereby amended by changing Section 1 thereof and by substituting in lieu of said Section 1 the following new Section 1:

"1. The name of the limited liability company is SBSWU, LLC."

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Amendment to Certificate of Formation of Seven Bridges Supply LLC this 31st day of July, 2017.


Adam Kaplan, Authorized Representative

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