

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.

(((H160000265653)))



H160000265653ABC+

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

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)205-8842

Phone Fax Number

: (850)878-5368

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

Email A	Address:	_							_
---------	----------	---	--	--	--	--	--	--	---

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

# DEANCURT MELBOURNE LLC

Certificate of Status	1
Certified Copy	
Page Count	05
Estimated Charge	\$30.00

FEB 02 2016 ~

S. YOUNG

Electronic Filing Menu

Corporate Filing Menu

Help

# **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: Deancurt Melbourne LLC				
Name o	of Foreign	Limited Liabi	lity Comp	pany
Dear Sir or Madam:				
The enclosed application, certificate an	nd fee(s) ar	e submitted fo	or filing.	
Please return all correspondence conce	rning this i	matter to the f	ollowing:	
Stephanie Briggs				
Name of Person	Ω	······································		
Aspen Square Management, Inc.				
Firm/Company		· · ·		
380 Union Street, Suite 300				
Address				7 18 mm
West Springfield, MA 01089				
City/State and 2	Zip Code			
stephanie_briggs@aspensquare.com	,			الله الله الله الله الله الله الله الله
E-mail address: (to be used for future	e annual re	port notificati	on)	
For further information concerning this	matter, ple	ease call:		
Stephanie Briggs		t ( 413	439-6380	)
Name of Person			& Daytim	e Telephone Number
STREET/COURIER ADDRE Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassec, Florida 32301	ess:	·	Registra Divisio P.O. Bo	ING ADDRESS: ation Section in of Corporations ox 6327 ssee, Florida 32314
Enclosed is a check for the following  \$25 Filing Fee  Certificate of	ee &	\$55 Filin		S60 Filing Fee, Certificate of State Certified Copy

CR2E055 (9/15)

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

#### SECTION 1 (1-4 must be completed)

Name of limited liability Company as it appear  State: Deancurt Melbourne LLC	rs on the records of the Florida De	partment of
Enter new principal office address, if applicable:	380 Union Street, Suite 300	
(Principal office address MUST BE A STREET ADDRESS)	West Spingfield, MA 01089	
Enter new mailing address, if applicable:	380 Union Street, Suite 300	
( <u>Mailing address</u> <u>MAY BE A POST OFFICE BOX</u> )	West Spingfield, MA 01089	
2. The Florida document number of this limited lia	bility company is: M1500000491	4
3. Jurisdiction of its organization: Delaware	·	
4. Date authorized to do business in Florida: June	23, 2015	
SECTION II (5-9 complete only the applicable		53 7
5. New name of the limited liability company: Grant (must	rand Oaks Pennington LLC t contain "Limited Liability Comp	any, ""L.L.C.," or "LLC.")
(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 alter	siness in Florida and attach a mate name. The alternate name
6. If amending the registered agent and/or registere registered agent and/or the new registered office ac	ed officer address on our records, sidness here:	enter the name of the new
Name of New Registered Agent:	·	
New Registered Office Address:	Enter Florida S	Space Address
	Enter Plottad L	_
	City	_, Florida
New Registered Agent's Signature, if changing Rel I hereby accept the appointment as registered agenthe provisions of all statutes relative to the proper accept the obligations of my position as registed document is being filed to merely reflect a change liability company has been notified in writing of the	nt and agree to act in this capacity and complete performance of my ered agent as provided for in Cha in the registered office address, I	duties, and I am familiar with pter 605, F.S. Or, if this
If C	hanging Registered Agent, Signate	re of New Registered Agent

3

	ment changes person, title or capacity er of the Company is hereby amended.	in accordance with 605.0902 (1)(e), indica	ate that change:
itle/ Capacity	Name	Address	Type of Action
Manager	Deancurt Realty Group, Inc.	21 Ramah Circle	
		Agawam, MA 01001	⊠ Remove
Manager	Nepsa Manager LLC	380 Union Street, Suite 300	<b>⊠</b> Arda
	,	West Spingfield, MA 01089	Rethove
*****			Add  Remove
			Add
			Remove
			Add
			Remove

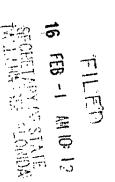
Filing Fee: \$25.00

Typed or printed name of signee

# Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "DEANCURT MELBOURNE LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "GRAND OAKS PENNINGTON LLC" ON THE TWENTY-NINTH DAY OF JANUARY, A.D. 2016, AT 1:09 O'CLOCK P.M.





5767854 8320 SR# 20160505668 Authentication: 201758765 Date: 02-01-16

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