7/18/2017

Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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.

(((H17000187355 3)))



H170001873553ABC4

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:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA800000023 Phone : (512)418-6949 Fax Number : (954)208-0845

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

Email Address:

西

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN COLONY AMERICAN FINANČE LENDER, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

Help

Electronic Filing Menu — Corporate Filing Menu

S. WARREN

JUL 1 9 2017

COVER LETTER

Division of Corporations	
SUBJECT: Colony American Finance Lender, LLC	
	imited Liability Company
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are	submitted for filing.
Please return all correspondence concerning this n	natter to the following:
Credit Legal Department	
Name of Person	
Fortress Investment Group	
Firm/Company	
1345 Avenue of the Americas 46th FL	
Address	•
New York, NY 10105	
City/State and Zip Code	
E-mail address: (to be used for future annual re	port notification)
C-man address. (to be used for ideale amounte	port nonneury
For further information concerning this matter, ple	ease call:
a	1()
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Ctifton 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: \$\Bigsim \text{\$\subseteq \$25 \text{ Filing Fee & Certificate of Status}}\$	S55 Filing Fee & S60 Filing Fee. Certified Copy Certified Copy Certified Copy
CR2E055 (9/15)	2

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: Colony American Finance Lender, LLC			
			-
Enter new principal office address, if applicable:			-
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)			-
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			- -
2. The Florida document number of this limited liab	oility company is: M16000000016		_
Jurisdiction of its organization: Delaware Date authorized to do business in Florida: 12/3	1/2015		-
SECTION II (5-9 complete only the applicable c	hanges)		
5. New name of the limited liability company: Comust (must	reVest American Finance Lender LLC contain "Limited Liability Company," "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	inging members adopting the atternate name. The ." or "LLC.")	:=:::=	1
6. If amending the registered agent and/or registered	d officer address on our records, enter the name of	a <u>tijas nem</u>	= -
registered agent and/or the new registered office ad			18 81
Name of New Registered Agent:		7.3 - 713 -	
New Registered Office Address:	Control Control of the control of th	· · · · · · · · · · · · · · · · ·	
	Enter Florida Street Address, Florida City Z	937	
	, Florida	in Early	_ద:
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agen the provisions of all statutes relative to the proper and accept the obligations of my position as registe document is being filed to merely reflect a change liability company has been notified in writing of th	gistered Agent; of and agree to act in this capacity. I further agre and complete performance of my duties, and I ar ered agent as provided for in Chapter 603, F.S. C in the registered office address, I hereby confirm	re to comp n familiar Or, if this	W-1171

1. If the amendment changes person, title or capacity in accordance with 605,0902 (1)(e), indicate that change:					
le/ Capacity	Name	Address	Type of Action		
			Add		
			Remov		
			∏Add		
			Remov		
			∏Add		
			Remov		
			☐ Add		
			Remove		
			Add		
			Remov		
aforementioned an	ficate, if required: no more than 90 ha nendment(s), duly authenticated by the the law of which this entity is organized. Signature of the Constantine M. Dakolias	e official having custody of rece	ords in the Link AR		

<u>Delaware</u>

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'COLONY AMERICAN

FINANCE LENDER, LLC', FILED A CERTIFICATE OF AMENDMENT, CHANGING

ITS NAME TO 'COREVEST AMERICAN FINANCE LENDER LLC' ON THE

SEVENTEENTH DAY OF JULY, A.D. 2017, AT 4:35 O'CLOCK P.M.

¢



Authentication: 202899028

Date: 07-17-17

5410043 8320 SR# 20175276778