146000006140

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
☐ ЫСК-Л	⇒ □ WAIT [MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of St	atus
Special Instruction	s to Filing Officer	
	· · · · · · · · · · · · · · · · · · ·	

Office Use Only



600362369116

12 FH 2: 04

31: 12.22 NH 9: 19

WAR 2 : 2021

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	120000001	95
	REFERENCE	:	I	4304394
	AUTHORIZATION	:	Spell of	na
	COST LIMIT	:	~ \ .	, •
ORDER DATE :	March 9, 2021			
ORDER TIME :	10:55 AM			
ORDER NO. :	696756-035			
CUSTOMER NO:	4304394			
				-
FOREIGN FILINGS				

CORPORATE
LIMITED PARTNERSHIP
XX LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

NAME: US SFE ASSET COMPANY 5, LLC

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT# 61594

EXAMINER:

COVER LETTER

-	istration ision of	Section Corporations			
SUBJECT:	US SF	E Asset Company 5, LLC		1	
		Name of Forei	gn Limited Li	ability Co	ompany
Dear Sir or	Madam:				
The enclose	d applic	ation, certificate and fee(s) are submitte	d for filin	ã.
Please retur	n all cor	respondence concerning th	is matter to th	ne followi	ng:
Mary Grace	De Asis				
		Name of Person		_	
Mayer Brow	n LLP				
		Firm/Company		_	
71 South W	acker Dr	ive			
		Address		_	
Chicago, IL	60606				
		City/State and Zip Cod	le		
mdeasis@m	*				
E-mail ad	ldress: (t	o be used for future annua	l report notifi	cation)	
For further i	nformat	ion concerning this matter	, please call:		
Mary Grace	De Asis		312 at (701-8	3867
	Nam	e of Person	_ \	de & Day	time Telephone Number
	ing Addr	ess: Section		Street A	address: ration Section
		Corporations		-	on of Corporations
	Box 63				entre of Tallahassee
Tall	ahassee,	FL 32314			N. Monroe Street, Suite 810 assee, FL 32303
		a check for the following			
□\$25 Filing	g Fee	☐ \$30 Filing Fee & Certificate of Status	S55 Filin Certified		☐ \$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 (1-4 must be completed)

Name of limited liability Company as it appears US SFE Asset Company 5, LLC State:	s on the records of the Florida Dep	partment of
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	bility company is: M1600000614	0 0
Jurisdiction of its organization: Delaware		一点
4. Date authorized to do business in Florida: 08/02		
5. New name of the limited liability company: (must	·	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	aging members adopting the alter	
6. If amending the registered agent and/or registered registered agent and/or the new registered office ad		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida S	treet Address
	, Florida	
	City	Zip Code
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 of and accept the obligations of my position as registe document is being filed to merely reflect a change is liability company has been notified in writing of this	t and agree to act in this capacity, and complete performance of my a cred agent as provided for in Chap in the registered office address, 1 h	luties, and I am familiar with the oter 605, F.S. Or, if this

If Changing Registered Agent, Signature of New Registered Agent

. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:			
itle/ Capacity	<u>Name</u>	Address	Type of Action
	·		□Add
			□Remo
			DAdd
			□Remo
			□Add
			□Remo
			□Add
			□Remo
			□Add
aforementioned am	he law of which this entity is organiz	e official having custody of records in	□Remo

Filing Fee: \$25.00

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "US SFE ASSET COMPANY

5, LLC", FILED A RESTATED CERTIFICATE, CHANGING ITS NAME TO "BAF

ASSETS 3, LLC" ON THE TWENTY-THIRD DAY OF FEBRUARY, A.D. 2021,

AT 6:40 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED
LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF
DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT
HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS
OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BAF ASSETS 3, LLC" WAS FORMED ON THE FOURTEENTH DAY OF JULY, A.D. 2016.



Authentication: 202684638

Date: 03-09-21

6096371 8320 SR# 20210842190