

MI6000009442

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 DEC 15 AM 8:14

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J. HARRIS

CHIEF CLERK

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 423650 4804708

AUTHORIZATION :

COST LIMIT : \$25.00



ORDER DATE : December 15, 2016

ORDER TIME : 3:18 PM

ORDER NO. : 423650-020

CUSTOMER NO: 4804708

FOREIGN FILINGS

NAME: APHELION PARTNERS GP LLC

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Aphelion Partners GP 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:

David Ogman
Name of Person

Firm/Company

6001 Broken Sound Parkway, Suite 424
Address

Boca Raton, FL 33487
City/State and Zip Code

david.m.ogman@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Aaron Mikat at (212) 574-1690
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)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 16, 2016

CSC
MELISSA ZENDER

RESUBMIT

Please give original
submission date as file date.

SUBJECT: APHELION PARTNERS GP LLC
Ref. Number: M16000009442

We have received your document for APHELION PARTNERS GP LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 616A00026739

RECEIVED
DEPARTMENT OF STATE
16 DEC 20 AM 10: 59

FILED
DEPARTMENT OF STATE
16 DEC 15 AM 8: 14

**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: Aphelion Partners GP LLC

Enter new principal office address, if applicable: _____

(Principal office address
MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: _____

(Mailing address
MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M16000009442

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: December 1, 2016

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

5. New name of the limited liability company: Aphelium Partners GP 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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FILED
CLERK OF COURT
JANUARY 12 2017

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>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> 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

David Ogman

Typed or printed name of signee

Filing Fee: \$25.00

16 DEC 15 AM 8:14

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "APHELION PARTNERS GP LLC", CHANGING ITS NAME FROM "APHELION PARTNERS GP LLC" TO "APHELIUM PARTNERS GP LLC", FILED IN THIS OFFICE ON THE FIFTEENTH DAY OF DECEMBER, A.D. 2016, AT 5:51 O`CLOCK P.M.



6220777 8100
SR# 20167109506

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 203534461
Date: 12-16-16

DELAWARE
CERTIFICATE OF AMENDMENT
OF THE
CERTIFICATE OF FORMATION
OF
APHELION PARTNERS GP LLC

(Pursuant to Section 18-202 of the Delaware Limited Liability Company Act)

FIRST: The name of the limited liability company is Aphelion Partners GP LLC (the "Company").

SECOND: Pursuant to the provisions of Section 18-202 of the Delaware Limited Liability Company Act, the Certificate of Formation (the "Certificate") of the Company is hereby amended to reflect the following changes:

Article First of the Certificate of Formation of the Company is hereby amended to reflect a change of the name of the Company.

Article First of the Certificate is hereby amended and restated in its entirety to read as follows:

"First: The name of the limited liability company is: Aphelium Partners GP LLC (the "Company")."

THIRD: This amendment to the Certificate of Formation of the Company shall be effective upon filing.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Amendment of the Certificate of Formation of the Company this 14th day of December, 2016.

By: 

Name: David Ognan

Title: Authorized Person