

M18000002019

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

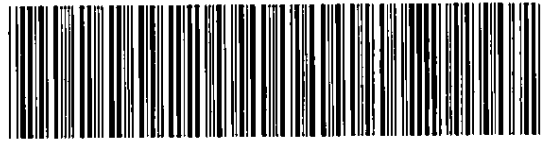
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
2023 MAR 14 PM 12:53
DIV. OF
CORPORATION, PARTNERSHIPS,
AND LIMITED LIABILITY COMPANIES
FLORIDA

FILED
2023 MAR 14 AM 10:34
TALLAHASSEE, FLORIDA

3/16/2023

FLORIDA FILING & SEARCH SERVICES, INC.

**P.O. BOX 10662 TALLAHASSEE, FL 32302
155 Office Plaza Dr Ste A Tallahassee FL 32301
PHONE: (800) 435-9371; FAX: (866) 860-8395**

DATE: 03/14/23

NAME: SUNSTONE PROPERTIES TRUST, LLC

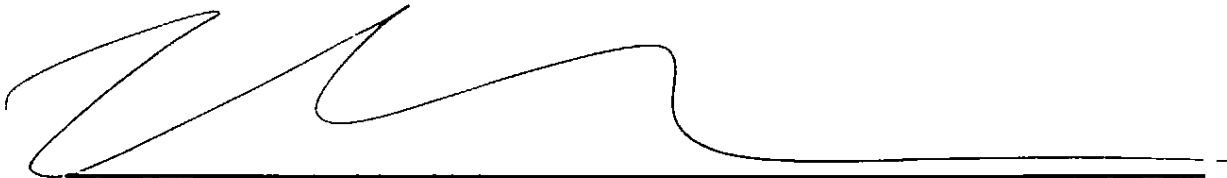
TYPE OF FILING: *Amendment*

COST: 25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SUNSTONE PROPERTIES TRUST, 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:

EMILY ELLIS
Name of Person

NEVERS PALAZZO ET AL
Firm/Company

31248 OAK CREST DRIVE, SUITE 200
Address

WESTLAKE VILLAGE, CA 91361
City/State and Zip Code

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

For further information concerning this matter, please call:

EMILY ELLIS at (818) 879-9700
Name of Person Area Code & Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

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

2023 MAR 14 AM 10:34

CLERK OF STATE
TALLAHASSEE, FL

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: Sunstone Properties Trust, 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: M1800002019

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 2/27/2018

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

5. New name of the limited liability company: Sunstone Two Tree, 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

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

John Charles Maddux

Typed or printed name of signee

Filing Fee: \$25.00

Delaware

Page 1


The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "SUNSTONE CAPITAL PARTNERS, LLC" FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "SUNSTONE PROPERTIES TRUST, LLC", ON THE SEVENTH DAY OF JANUARY, A.D. 2014, AT 5:46 O`CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THE SAID "SUNSTONE PROPERTIES TRUST, LLC" FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "SUNSTONE TWO TREE, LLC", ON THE THIRTEENTH DAY OF JANUARY, A.D. 2023, AT 4:27 O`CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SUNSTONE TWO TREE, LLC", IS THE LAST KNOWN TITLE OF RECORD OF THE AFORESAID LIMITED LIABILITY COMPANY.




Jeffrey W. Bullock, Secretary of State

5252348 8321
SR# 20230162422

Authentication: 202511414
Date: 01-17-23

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