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2018-11-15 15:36:45 CST

49542000845 From Ramo McGraw

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (350) 617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614) 280-3335
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: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
DEANCURT WINTER GARDEN LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$55.00

2018 NOV 15 PM 3:58

18 NOV 15 AM 8:52
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DIVISION OF STATE
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FLORIDA

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Help

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: Deancurt Winter Garden LLC

Enter new principal office address, if applicable: 380 Union Street

(Principal office address
MUST BE A STREET ADDRESS)

Suite 300

West Springfield, MA 01089

Enter new mailing address, if applicable:

(Mailing address
MAY BE A POST OFFICE BOX)

380 Union Street

Suite 300

West Springfield, MA 01089

2. The Florida document number of this limited liability company is: M18000003515

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 04/11/2018

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

5. New name of the limited liability company: Slate West Eleven 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

City Florida 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:

The Manager has changed to Nepsa Manager LLC

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Manager	Nepsa Manager LLC	380 Union Street, Suite 300	<input checked="" type="checkbox"/> Add
		West Springfield, MA 01089	<input type="checkbox"/> Remove
Manager	Deancourt Realty Group, Inc.	21 Ramah Circle	<input type="checkbox"/> Add
		Agawam, MA 01001	<input checked="" 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.

SLATE WEST ELEVEN LLC, By Nepsa Manager LLC, Its Manager, By Nepsa Property Investors, Inc., Its Manager

X

Signature of the authorized representative

Fred Anthony
President

Typed or printed name of signee

Filing Fee: \$25.00

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 WINTER
GARDEN LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME
TO "SLATE WEST ELEVEN LLC" ON THE THIRTEENTH DAY OF NOVEMBER,
A.D. 2018, AT 1:21 O'CLOCK P.M.



6838597 8320
SR# 20187668531

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: 203911431
Date: 11-15-18