### 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.

(((H20000163665 3)))



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 : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-0821 : (850)558-1515 Fax Number

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

<b>Email</b>	Address:		

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DCP FUND I ADVISER, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Y SIII KEP

JUN 0 2 2030

Electronic Filing Menu Corporate Filing Menu

Help

H20000163665 3

## **COVER LETTER**

Division o	f Corporations		
SUBJECT: DCP	FUND I ADVISER, LLC		
	Name of Foreign l	Limited Liabilit	y Company
Dear Sir or Madæ	n:		
The enclosed appl	ication, certificate and fee(s) ar	e submitted for	filing.
Please return all co	orrespondence concerning this i	matter to the fol	llowing:
Attn: Director-Lega	al		
	Name of Person	<del></del>	
c/o Colony Capital	, Inc.		
	Firm/Company		
590 Madison Aven	nue, 34th Floor		
	Address		
New York, New Yo	ork 10022		
	City/State and Zip Code		
clny-legalassistar	nce@clny.com		
E-mail address:	(to be used for future annual re	eport notificatio	π)
For further inform	ation concerning this matter, pl	lease call:	
			547-2600
No	une of Person		Daytime Telephone Number
Mailing Address: Registration Section		R	reet Address: egistration Section
Division of Corporations P.O. Box 6327			ivision of Corporations he Centre of Tallahassee
	ee, FL 32314		415 N. Monroe Street, Suite 810 allahassee, FL 32303
Enclosed	is a check for the following ar	nount:	
□\$25 Filing Fee	S30 Fifing Fee & Certificate of Status	355 Filing Fe Certified Cop	by Certificate of Status &
CR2E055 (9/15)			Centified Copy

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY & ELESE

### SECTION I (1-4 must be completed)

AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT **BUSINESS IN FLORIDA** 

1. Name of limited liability Company as it appears	s on the records of the Florida Department o	f
State: DCP FUND   ADVISER, LLC	TEO DADY OF COMMEDCE DOINE OF	TE 240
Enter new principal office address, if applicable:	750 PARK OF COMMERCE DRIVE, SUI	
( <u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u> )	BOCA RATON, FLORIDA 33487	
Enter new mailing address, if applicable: ( <u>Mailing address</u> <u>MAY BE A POST OFFICE BOX</u> )		
2. The Florida document number of this limited lia	ability company is: M18000003900	T SEC TO UII
3. Jurisdiction of its organization: DELAWARE		
4. Date authorized to do business in Florida: APR	RIL 23, 2018	· · · · · · · ·
SECTION II (5-9 complete only the applicable of	changes)	<u>.</u> <u>.</u>
SECTION II (5-9 complete only the applicable of the limited liability company:  (If name unavailable, enter alternate name adopted conv of the written consent of the managers or managers or managers or managers or managers.)	CP FUND ADVISER, LLC t contain "Limited Liability Company, " "L.	
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or mai must contain "Limited Liability Company," "L.L.C	IMENTE THE THE OWN HOW PRINTED THE CHARLES THE	lorida and attach a :. The alternate name
6. If amending the registered agent and/or registere registered agent and/or the new registered office ac	ed officer address on our records, enter the n ddress here:	ame of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida Street Addi	P/A C C
	City Prorida	Zip Code
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered ages the provisions of all statutes relative to the proper and accept the obligations of my position as regist document is being filed to merely reflect a change hability company has been notified in writing of the	nt and agree to act in this capacity. I further and complete performance of my duties, and tered agent as provided for in Chapter 605, i in the registered office address, I hereby con	d Lam familiar with = F.S. Or, if this

If Changing Registered Agent, Signature of New Registered Agent

The Authori	ment changes person, title or capacity it zed Persons previously on file have been r sed attachment	n accordance with 605.0902 (1)(c), indicate that emoved and replaced with the authorized persons	t change: set forth
Title/ Capacity	<u>Name</u>	Address	Type of Action
Authorized Persons	See attachment		
			□Remove
			□Add
			□Remove
****			□Add
			□Remove
			⊡Add
			Remove
			□Add
aforementio	under the law of which this entity is or	by the official having custody of records in the ganized.	□Remove
	Geoffrey Goldschein Signature	of the authorized representative	

Filing Fee: \$25.00

H20000163665 3

Attachment to Application by Foreign Limited Liability Company to File Amendment to Certificate of Authority to Transact Business in Florida

#### Authorized Persons of DCP Fund I Adviser, LLC

Name	Title	Address
Benjamin Jenkins	Chairman	750 Park of Commerce Drive, Suite 210 Boca Raton, Florida 33487
Marc Ganzi	Chief Executive Officer	750 Park of Commerce Drive, Suite 210 Boca Raton, Florida 33487
Jeffrey Ginsberg	Vice President	750 Park of Commerce Drive, Suite 210 Boca Raton, Florida 33487
Mark M. Hedstrom	Vice President, Treasurer & Assistant Secretary	515 S. Flower Street, 44th Floor Los Angeles, California 90071
Jonathan H. Grunzweig	Vice President	515 S. Flower Street, 44th Floor Los Angeles, California 90071
Ronald M. Sanders	Vice President, Secretary	590 Madison Avenue, 34th Floor New York, New York 10022
Geoffrey Goldschein	Vice President	654 Madison Avenue, Suite 602 New York, New York 10065
Donna Hansen	Vice President	515 S. Flower Street, 44th Floor Los Angeles, California 90071
Kristen Whealon	Chief Compliance Officer	2000 South Colorado Boulevard, Annex Suite 230 Denver, Colorado 80222

H20000163665 3



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "DCP FUND I ADVISER, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "DCP FUND ADVISER, LLC" ON THE TWELFTH DAY OF MAY, A.D. 2020, AT 4:12 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 "DCP FUND ADVISER, LLC" WAS FORMED ON THE SEVENTH DAY OF FEBRUARY, A.D. 2018.



Authentication: 203022318

6747534 8320 SR# 20205328552 Date: 06-01-20