

3/14/2019

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
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
VANTACORE HOLDING, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

7 PAGE FAX

PLEASE HONOR THE ORIGINAL
SUBMISSION DATE OF 03/14/2019

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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: VantaCore Holding, LLC

Enter new principal office address, if applicable:

(Principal office address

MUST BE A STREET ADDRESS)

30 South 17th Street, Ste. 840

Philadelphia, PA 19103

Enter new mailing address, if applicable:

(Mailing address

MAY BE A POST OFFICE BOX)

30 South 17th Street, Ste. 840

Philadelphia, PA 19103

2. The Florida document number of this limited liability company is: M18000011156

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 12/11/2018

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

5. New name of the limited liability company: StonePoint Holding, 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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19 MAR 14 PM 1:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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)(c), 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
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_____	_____	_____	<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

Michael J. McConvery

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 THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "VANTACORE HOLDING, LLC", CHANGING ITS NAME FROM "VANTACORE HOLDING, LLC" TO "STONEPOINT HOLDING, LLC", FILED IN THIS OFFICE ON THE FOURTEENTH DAY OF MARCH, A.D. 2019, AT 4:41 O'CLOCK P.M.

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19 MAR 14 PM 1:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



7133403 8100
SR# 20191986171

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


Jeffrey W. Bullock, Secretary of State

Authentication: 202447889
Date: 03-15-19

State of Delaware
Secretary of State
Division of Corporations
Delivered: 04:41 PM 03/14/2019
FILED: 04:41 PM 03/14/2019
SR: 20191986171 File Number: 7133403

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19 MAR 14 PM 1:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF FORMATION
OF
VANTACORE HOLDING, LLC

The undersigned, being duly authorized to execute and file this Certificate of Amendment to Certificate of Formation for the purpose of amending the Certificate of Formation pursuant to the Section 18-202 of the Limited Liability Company Act of the State of Delaware, does hereby certify as follows:

FIRST

1. Name. The name of the limited liability company is VantaCore Holding, LLC (the "Company").

SECOND

Paragraph 1 of the Certificate of Formation of the Company is hereby deleted in its entirety and amended to read in full as follows:

1. Name. The name of the limited liability company is StonePoint Holding, LLC (the "Company").

IN WITNESS WHEREOF, the undersigned has duly executed this Certificate
of Amendment to Certificate of Formation as of the 14th day of March, 2019.

VANTACORE HOLDING, LLC

By: 

Name: Colin Oerton

Title: Chief Executive Officer

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19 MAR 19 PM 1:28
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TALLAHASSEE, FLORIDA

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3/18/2019 4:31:15 PM PAGE 1/001 Fax Server



March 18, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

VANTACORE HOLDING, LLC
315 SOUTH 16TH STREET
PHILADELPHIA, PA 19102

SUBJECT: VANTACORE HOLDING, LLC
REF: M18000011156

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

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.

The certified copy submitted did not have the copy, just the certificate. Please resubmit with the complete certified copy.

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.

Karen A Saly
Regulatory Specialist II

FAX Aud. #: H19000087347
Letter Number: 719A00005380

2019-03-18 15:38:21

P.O. BOX 6327 - Tallahassee, Florida 32314