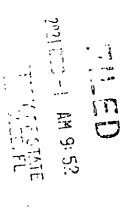
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CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 274275 4813885
AUTHORIZATION Spell of man
COST LIMIT : \$\sqrt{25.00}
ORDER DATE : December 1, 2021
ORDER TIME : 1:36 PM
ORDER NO. : 274275-010
CUSTOMER NO: 4813885
FOREIGN FILINGS
NAME: 711 NPFL LLC
CORPORATE LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY
XXXX AMENDMENT
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Alexxis Weiland -- EXT#

COVER LETTER

TO:		stration S ion of C	Section orporations				
SUBJ	ECT:	711 NP	FL LLC Name of Foreign	Limited Liah	ility Com	nany	
			Name of Poleign	Ellitted Elaoi	inty com	Pany	
Dear S	Sir or N	/ladam:					
The er	nclosed	l applica	tion, certificate and fee(s) a	re submitted f	or filing.		
Please	return	ail corr	espondence concerning this	matter to the	following	<u>;</u> :	
Micha	ıel Dam	nast			_		
			Name of Person				
c/o Ar	rnold &	Porter L	LP		_		
			Firm/Company				
250 V	Vest 55	th Street			_		
			Address				
New	York, N	IY 10019			_		
		-	City/State and Zip Code				
			noldporter.com		- . 、		
E-1	mail ad	dress: (t	o be used for future annual	report notifica	ition)		
For fi	urther	informat	ion concerning this matter,	please call:			
Mich	ael Dar	nast		212 at (836-73	377 	
-		Nam	ne of Person	Area Cod	e & Dayt	ime Telephone Number	
	Mai	ling Addr	ress:		Street A		
			Section			ation Section	
	Div	ision of	Corporations		Division of Corporations		
	P.O	. Box 6.	327		The Centre of Tallahassee		
	Tal	lahassee	, FL 32314			Monroe Street, Suite 810 Assee, FL 32303	
	Enc	closed is	a check for the following			-	
□\$2	25 Filin	ig Fee	\$30 Filing Fee & Certificate of Status	☐ \$55 Filing Certified	-	Sentificate of Status &	
CR2E	055 (9/1	5)				Certified Copy	

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)

	I (1-4 illust be completed)
1. Name of limited liability Company as it appears	on the records of the Florida Department of
State: 711 NPFL LLC	
Enter new principal office address, if applicable:	
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
cartational lie	whiling company is:
2. The Florida document number of this limited lia	
Jurisdiction of its organization: Delaware	The second secon
4. Date authorized to do business in Florida: Nov	vember 18, 2021
SECTION II (5-9 complete only the applicable	MELD NPF LLC
	で流·
(If name unavailable, enter alternate name adopte copy of the written consent of the managers or m must contain "Limited Liability Company," "L.L.	ed for the purpose of transacting business in Florida and attach a anaging members adopting the alternate name. The alternate nameC." or "LLC.")
6. If amending the registered agent and/or registered agent and/or the new registered office	ered officer address on our records. enter the name of the new address here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida Street Address
	. Florida Zip Code
-	City Zip Code
the provisions of all statutes retailive to the prop and accept the obligations of my position as reg document is being filed to merely reflect a chan liability company has been notified in writing o	per and complete performance of my duties, and I am familiar with over and complete performance of my duties, and I am familiar with per and complete performance of my duties, and I am familiar with per and complete performance of this change. I hereby confirm that the limited of this change.
	f Changing Registered Agent, Signature of New Registered Agent

itle/ Capacity	<u>Name</u>	Address <u>T</u>	ype of Action
tile/ Capacity	1.300.10		□Add
			□Remov
			□Add
			□Remov
			□Add
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			□Add
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			□Add
o foromentioned	rtificate, if required: no more that amendment(s), duly authenticate er the law of which this entity is on the law of which the law of whic	d by the official having caston,	⊡Remi

Filing Fee: \$25.00

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "711 NPFL LLC", FILED

A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "MELD NPF LLC"

ON THE TWENTY-NINTH DAY OF NOVEMBER, A.D. 2021, AT 5:05 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 "MELD NPF LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF SEPTEMBER, A.D. 2021.



Authentication: 204829557

Date: 12-01-21