## 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 : (850) 205-8842

Fax Number

; (850)878-5368

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

Email Address:

## FLORIDA/FOREIGN LP/LLLP SVT Park Central Business Park I, L.P.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$1,000.00

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Help

MAR 1 7 2015

### COVER LETTER

TO:	Registration Sect Division of Corp			
SUBJ	ECT: SVT Park Co	entral Business Park I, L.P.		
		c of Foreign Limited Partn	ership or Limited Liability	Limited Partnership
partne	rship to transact bus	certificate of status and fe- siness in Florida. Indence concerning this and	-	a foreign limited partnership or limited liability limited
	<del></del>	Contact Person	<del></del>	
		Firm/Company	<del></del>	
		Address		
	icki@starwood.com			
		sed for future annual report meerning this matter, plent	,	
	Name of Contac	t Person	_at ()Area Code and Dayti	ine Telephone Number
Enclos	ed is a check for th	e following amount:		
(\$965	00.00 Filing Pecs Filing Fee and egistered Agent	□\$1,008.75 Filing Fees and Certificate of Status	☐ \$1,052.50 Filing Fees and Certified Copy	© \$1,061.25 Filing Fee, Certified Copy, and Certificate of Status
Registe Division Clifton 2661 E	ET ADDRESS: ration Section on of Corporations Building Executive Center Ci- assee, FL 32301	role	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	

## APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

1. SVT Park Central Business Park I, L.P.	
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)  Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.  Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.P. or LLLP.	
If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to reg business in Florida; must contain acceptable suffix.	-
2. Delaware 3, 3/2/2015	2015 SALC
State or Country of Formation  4. Federal Employer Identification Number:  4. 7-3391503  Date of Formation	
5. Name of Registered Agent for Service of Process and Florida Street Address:	121 m
C T Corporation System	
1200 South Pine Island Road	S
Plantation, Florida 33324	所 108
6. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply we of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the my position as registered agent.  CT Corporation Systemy  Alfred Yo  Signature of Registered Agent  Assistant Se	unan
7. Principal Office: 8. Mailing Address:	, c. c.c., y
591 W. Putnam Ave, Greenwich CT, 06830 591 W. Putnam Ave, Greenwich CT, 06830	
9. If limited partnership is a limited liability limited partnership, check box.  10. Name, principal office address, and mailing address of each general partner:  Name of General Partner:  SYT Owner GP, L.L.C.  Name of General Partner:  Street Address:  Street Address:  Street Address:	
Mailing Address: Muiling Address:	<del></del> -
Name of General Partner:Name of General Partner:	
Street Address: Street Address:	

Street Address:						
Mailing Address:						
11. Effective date, if other than the date of filing:						
ial having custody of	o the delivery of this application to the the entity's records in the jurisdiction under					
,20	- Nick Antonopoulos, Authorized Person					
	signing on behalf of general partner SVT Owner GP, L.L.C.					
	ate this document is fire than 90 days prior t					

The individual signing this document affirm that the facts stated herein are true and the individual is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Filing Fees: Certified Copy (optional); Certificate of Status (optional);

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

\$52.50 \$8.75

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# Delaware

PAGE

# The First State

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

DELAWARE, DO HEREBY CERTIFY "SVT PARK CENTRAL BUSINESS PARK I,

L.P." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND

IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTEENTH DAY OF MARCH,

A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5702412 8300

150359190

You may varify this cortificate online at corp. dalaware.gov/authver.shtml

petrey W. Bullock, Secretary of State

DATE: 03-16-15