### Florida Department of State

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(((H15000217374 3)))



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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

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#### Foreign Limited Liability Company SPT WAH WINDSONG II LLC

Certificate of Status	0
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Page Count	05
Estimated Charge	\$125.00

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Corporate Filing Menu

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#### **COVER LETTER**

TO:	Registration Section Division of Corporati	0na		
SUBJ:	em.	SPT WA	H Windsong II LLC	
0000		Name of Lim	ited Liability Company	
The en	nclosed "Application by F nce, and check are submit	oreign Limited Liability Co ted to register the above re	mpany for Authorization to Transact Business in erenced foreign limited liability company to true	Florida," Certificate o sact business in Florid
Please	return all correspondence	concerning this matter to t	he following:	
		Reb	ecca L, Ramstrom	
		·	Name of Person	<del> </del>
		Ра	ul Hastings LLP	
	<del></del>		Pirm/Company	
	1170 Peachtres Street N.E., Suite 100			
			Address	
		Atla	nta, Georgia 30309	
		Cln	/State and Zip Code	
			asio@inmroperty.com	
	<del></del>	E-mail address: (10 be t	sed for future annual report notification)	
For fu	rther information concern	ing this matter, please call:		
	Reb	ccca L. Ramstrom	at ( 404 ) 815-2231	
	Neme	of Contact Person	Area Code Daytimo Telephone N	lumber
	MAILING ADDRES		EET ADDRESS:	
	Division of Corporation Registration Section		ion of Carporations stration Section	
	P.O. Box 6327		on Building	
	Tallahassoc, FL 32314	2661	Executive Center Circle hassee, FL 32301	
Énclo	sed is a check for the	following amount:		
	☐ \$125.00 Filing Fee	□ \$130.00 Filing Fee &		ing Fee, Certificate
	J	Certificate of Status		Certified Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTIIORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

ill using univailable, enter alternate name adopted for the ourmose of transacting business in	Florida. The alternate name must include "Limited
iability Company," "L.L.C," or "LL.C.")	
Delaware 3. N/A	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
(Date first transacted business in Florida, if prior to reg	Jerratian \
(See sections 605,0904 & 605,0905, P.S. to determine per	talty liability)
c/o Starwood Property Trust, 591 W. Putnam Avenue, Greenwich, CT 06830	
	<u></u>
(Street Address of Principal Office)	<u></u>
c/o Starwood Property Trust, 591 W. Pumam Avenue, Greenwich, CT 06830	S. S.
	in the second
(Mailing Address)	
	ave authority to manage is/are:
<ol><li>The name, title or capacity and address of the person(s) who has/h</li></ol>	ave authority to manage is/are:
Andrew Sossen, Vice President, c/o Starwood Property Trust, 591 W. Putnam Aver	ST man
	Ç.F.
3. Attached is an original certificate of existence, no more than 90 day	is old, duly authenticated by the office
naving custody of records in the jurisdiction under the law of which it acceptable. If the certificate is in a foreign language, a translation of the	he cortificate under oath of the translat
must be submitted)	10 001111111111111111111111111111111111
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(	
Signature of an authorized per	son
Signature of an authorized por Signature of an authorized por an accordance with section 605.0203, P.S., the execution of this document constitutes an affirmation at any false information submitted in a document to the Department of Sials constitutes at	nder the penalties of perjury that the facts stated berein ar
Signature of an authorized per (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation an aware that any fajes information submitted in a document to the Department of Sizie constitutes a the Jason McCoy	nder the penalties of perjury that the facts stated berein ar

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.01 13 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of SPT WAH Windso	the Limited Liability ong II LLC	v Company is:		-	
If unavailable, the	he alternate to be use	ed in the state of Florida is:			
2. The name an	d the Florida street a	ddress of the registered agent and office are:		- 	
	C T Corporation System	n	75 TV	SEP	
		(Namo)		6- d	- 18 may - - 18 may - 18 may - - 18 may - 18 may
	1200 South Pine Island	Road	_ <u>@</u> ~	<u> 100</u>	in in the second
•	Florida S	treet Address (P.O. Box NOT ACCEPTABLE)		AH 7: 9	A
	Plantation	FI. 33324	_ <del></del>	-CU	
		City/State/Zip	700		

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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, Florida Statutes.



\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

# Delaware The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SPT WAH WINDSONG II LLC" 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 NINTH DAY OF SEPTEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

5798195 8300 SR# 20150054378

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

Authentication: 10015587

Date: 09-09-15