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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H15000217399 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

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

Email Address:

Foreign Limited Liability Company SPT WAH WINDCHASE LLC

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

Electronic Filing Menu

Corporate Filing Menu

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SEP 1 0 2015

J SHIVERS

COVER LETTER

TOI	Registration Section Division of Corporations					
SUBJ	ECT:	SPT WAH	Windchase LLC			
		Name of Limite	d Liability Company			
The en Exister	closed "Application by Foreig see, and check are submitted t	on Limited Liability Com o register the above refer	pany for Authoriza enced foreign limit	tion to Tra ed Hability	nsact Business in Florida," y company to transact busin	Certificate of test in Florida
Picase	return all correspondence con	cerning this matter to the	following:			
		Rebec	ca L. Ramstrom			
		И	ame of Person			
		Paul	Hestings LLP			
	-	F	inm/Company			
		1170 Peacht	rec Street N.E., Sui	to 100		
			Address			
		Allanta	, Georgia 30309			
	- ,	City/S	tate and Zip Code			
			io@Improperty.co			
		E-mail address: (to be used	l for future annual re	port notific	ation)	
For fur	ther information concerning th	nis matter, please call:			•	
	Rebecca	L. Ramstrom	ni (<u>404</u>	, 815-22	3)	
	Name of C	ontact Person	Area Code	Day	3) ytims Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Divisio: Registri Clifton 2661 E:	T ADDRESS: n of Corporations ation Section Building secutive Center Cir ssec, FL 32301	ole		
Enclos	sed is a check for the foll	owing amount:				
		1\$130.00 Filing Fee & Certificate of Status	S155,00 Filin Certified Cop		S160.00 Filing Fee, Co of Status & Certified C	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION 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:

Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "I.L.C.		
	. ,	
If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name multiplity Company," "L.L.C," or "L.L.C.")	est include "l	Limited
2. Dolaware 3. N/A		
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		
(Date first transacted business in Florida, U prior to registration.)	- <u></u>	_
(See sections 605,0904 & 605,0905, F.S. to determine penalty liability)		
w/o Starwood Property Trust, 591 W. Putnam Avenue, Greenwich, CT 06830		_
(Street Address of Principal Office)		
c/o Starwood Property Trust, 591 W. Putnam Avenue, Greenwich, CT 06830		_5 S
	253	- '6 '
(Mailing Address)		9
. The name, title or capacity and address of the person(s) who has/have authority to manage	is/are:	AH 7
ndrew Sossen, Vice President, c/o Starwood Property Trust, 591 W. Putnam Avenue, Greenwich, CT 06830	<u> </u>	다. 기: 다음
	<u>∑</u> ,	فنب
		_
. Attached is an original certificate of existence, no more than 90 days old, duly authenticate	d hy the a	— fficial
aving custody of records in the jurisdiction under the law of which it is organized, (A photoc		
eceptable. If the certificate is in a foreign language, a translation of the certificate under oath		
ust be submitted)		
The hand		
Signature of an authorized person a uccordance with section 605,0203, F.S., the execution of this document constitutes wrath matter the penalties of perjury that the a sware that any false information submitted in a document to the Department of State constitutes a third degree fellony as provided for in	theis stated for \$.B.17.155, P.S	erein are trud 5.)
Jason McCoy		
Typed or printed name of signee		

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)Xd), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

The name of the Limited Liability Company is: SPT WAH Windowse LLC					
If unavailable	e, the alternate to be use	ed in the state of Florida is:			
2. The name	and the Florida street a	address of the registered agent and office are:			
	C T Corporation System	m			
		(Name)			
	1200 South Pine Island				
	Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	Plantation	FL 33324			
		City/Sinte/Zip			

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 ull 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.

By: August Sheerer

August Sheerer

Accession Secretary

(Signature)

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



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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "SPT WAH WINDCHASE 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.

15 SEP -9 AM 7: 50

5798214 8300 5R# 20150054361

SR# 20150054361
You may verify this certificate online at corp.delaware.gov/authver.shtml

ANTITY W. BARREL, BARRELY of BLIFE

Authentication: 10015199

Date: 09-09-15