## Florida Department of State

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## Foreign Limited Liability Company SPT IVEY BOYNTON MOB LLC

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## COVER LETTER

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UBJECT:	SPT Ivey Boynton					
•		Name of	Limited Liability (	Company		
					ansact Business in Florida," Certificate y company to transact business in Florid	
lease return :	all correspondence	concerning this matter to the	following:			
	Andrew J. Sos	sen				
	<del></del>	N	lame of Person			
	SPT Ivey Boy	nton MOB LLC				
		Firm/Company				
	c/o Starwood I	c/o Starwood Property Trust, Inc. 591 West Putnam Avenue				
	· · · · · · · · · · · · · · · · · · ·		Address			
	Greenwich, Cl	06830				
	ensemble was record of the seal Platforms and	City/S	itate and Zip Code			
	asossen@starwo	od.com				
		E-mail address: (to be use	d for future annual	report not	ification)	
or further in	formation concerning	g this matter, please call:				
And	rew J. Sossen		203 at (	422-81	91	
	Name (	of Contact Person	Area Code	Day	time Telephone Number	
Divis Regis P.O.	LING ADDRESS: sion of Corporations stration Section Box 6327 shassee, FL 32314			Division Registrat Clifton B 2661 Exe	CADDRESS: of Corporations ion Section uilding secutive Center Circle see, FL 32301	
	check for the follow 25.00 Filing Fee	ring amount:  \$\sum_\$130.00 Filling Fee &  Certificate of Status	S155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN PLORIDA

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: SPT Ivey Boynton MOB LLC (Nome of Foreign Limited Liability Company; must include "Limited Llability Company," "L.L.C.," or "LLC.") (If name unavailable, enter afternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 591 West Putnam Avenue, Greenwich, CT 06830 (Street Address of Principal Office) 591 West Putnam Avenue, Greenwich, CT 06830 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: Plantation Registered agent's acceptance: 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 application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith 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. C T Corporation System By: (Registered agent's signati 8. The name, title or capacity and address of the person(s) who has have authority to manage is are: Andrew J. Sossen-Vice President and Secretary Jeffrey DiModica-President Rina Paniry-Chief Financial Officer 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) Signature of an authorized person This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$.817.155, F.S.

Andrew Sossen - Authorized Person

Typed or printed name of signer



Page 1

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

DELAWARE, DO HEREBY CERTIFY "SPT IVEY BOYNTON MOB 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 NOVEMBER, A.D. 2016.

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

6179450 8300

SR# 20166564439

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

Authentication: 203306720

Date: 11-09-16