Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170003183423)))



H170003183423ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (512)418-6949 Fax Number : (954)208-0845

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

Email Address:_

TOEC -5 REP. 16

Foreign Limited Liability Company SPT Dolphin West Pointe LLC

Certificate of Status	0	
Certified Copy	0	
Page Count	04	
Estimated Charge	\$125.00	

ZUNDEC -5 PH 1:50
SICRETARY OF STAIL
TALLAHASSEE, FLORID

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

Art BRAINSTILLING VILLE ORLAN

то:	Registration Section Division of Corporations				
2119 H	SPT DOLPHIN WEST POINTE LLC			•	
SUBJI		Limited Liability C	Company		-
Exister	nclosed "Application by Foreign Limited Liability Com	renced foreign limit			
Please	return all correspondence concerning this matter to the	following:	t +- '''		
•	Nadine Bethune		•	• . •	
		lame of Person			-
	Paul Hastings LLP				
Firm/Company					-
	1170 Peachtree Street NE, Suite 100				
		Address			.
	Atlanta, GA 30309				
	City/s	State and Zip Code			-
	dnewberry@Intproperty.com	10 B	······		_
17 17.	E-mail address: (to be use	ed for future annual	report no	illication)	
i-or rur	ther information concerning this matter, please call:			_	
	Nadine Bethune	at (Area Code	815-22 .)		_
	Name of Contact Person	Area Code		time Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327		Division Registrat Clifton B	_	
	Tallahassee, FL 32314			reutive Center Circle see, FL 32304	
Bactos	ed is a check for the following amount: IN \$125,00 Filing Fee	□ \$155,00 Filin Certified Copy		□ \$160.00 Filing Fee, Cof Status & Certified Co	

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

IN COMPLIANCE WITH SECTION (05.000, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREKIN. LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. SPT DOLPHIN WEST POINTE LLC (Name of Foreign Larrited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (It make unavariable, enter alternate name adopted for the purpose of transacting has need in Florica. The alternate name must include "Limited Liability Company," "LLC," or "LLC," (Jurisdiction under the low of which forcing limited liability company is organized) (Date tirst transacted husiness in Fornia, if prior to registration) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 6. 591 West Pumain Avenue 591 West Putagin Avenue (Street Address of Principal Office) (Mailing Audress) Greenwich, CT 06830 Greenwich, CT 06830 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: Plentation 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 comply with 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 (Registered agent's signature) Kimberly Laughrey, Asst. Secretary 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Secretary Andrew J. Sossen 591 West Putnam Avenue Greenwich, CT 06830 (Use attachments if necessary) 9. Attached is a certificate of existence, no more than 90 days old, duly unthenticated 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 eath of the translator must be submitted) 10. This document is executed in accordance with section 605 9203-(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 s.817.155, F.S. need begreature as To sustain Typed at printed name of signed



Page 1

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

DELAWARE, DO HEREBY CERTIFY "SPT DOLPHIN WEST POINTE 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 FIFTH DAY OF DECEMBER, A.D. 2017.

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



÷



Authentication: 203686258

Date: 12-05-17

6641618 8300 SR# 20177385911

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