

M18000009741

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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18 OCT 26 PM 4: 31

T. CLINE
OCT 30 2018
EXAMINER

[Handwritten signature]

SECRETARY OF STATE
TALLAHASSEE FLORIDA
2018 OCT 26 AM 8: 25

FILED



RESUBMIT

Please give original submission date as file date.

FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 29, 2018

CSC
ROXANNE TURNER
TALLAHASSEE, FL

SUBJECT: SHPC HOLDINGS I, LLC
Ref. Number: W18000094771

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2018 OCT 26 AM 8:25
SECRETARY OF STATE
TALLAHASSEE FLORIDA

We have received your document for SHPC HOLDINGS I, LLC and the authorization to debit your account in the amount of \$160.00. However, the document has not been filed and is being returned for the following:

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Tammi Cline
Regulatory Specialist III

Letter Number: 918A00022209

18 OCT 29 PM 1:57

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 461565 4304954
AUTHORIZATION : *[Signature]*
COST LIMIT : \$160.00

ORDER DATE : October 26, 2018
ORDER TIME : 3:18 PM
ORDER NO. : 461565-005
CUSTOMER NO: 4304954

FILED
2018 OCT 26 AM 8:25
TALLAHASSEE FLORIDA

FOREIGN FILINGS

NAME: SHPC HOLDINGS I, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: _____

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:

1. SHPC Holdings I, LLC
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC")

(If name unavailable, enter alternate name allowed for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware 3. 83-2329775
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration. (See sections 605.0904 & 605.0905, F.S. to determine penalty liability.)

5. 301 Yamato Road, Suite 2222 6. 301 Yamato Road, Suite 2222
(Street Address of Principal Office) (Mailing Address)
Boca Raton, FL 33431 Boca Raton, FL 33431

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Jeffrey L. Baxter
 Office Address: 9100 South Dadeland Blvd, Suite 700
Miami Florida 33156
(City) (Zip code)

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.

J. Baxter
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Mgr.</u>	<u>Marshal Seeman</u> <u>301 Yamato Road</u> <u>Suite 2222</u> <u>Boca Raton, FL 33431</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(Use attachments if necessary)

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)

10. 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 s.817.155, F.S.

MS
Signature of an authorized person

Marshal Seeman
Typed or printed name of agent

DEPARTMENT OF STATE
 AND TREASURY, FLORIDA
 2010 OCT 26 AM 8:25
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Delaware

Page 1


The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SHPC HOLDINGS I, 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 TWENTY-SIXTH DAY OF OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SHPC HOLDINGS I, LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF OCTOBER, A.D. 2018.

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




Jeffrey W. Bullock, Secretary of State

7119699 8300

SR# 20187349674

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

Authentication: 203692483

Date: 10-26-18