

8/8/2019

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : FLAGLER DEVELOPMENT GROUP, LLC
Account Number : I2002000144
Phone : (305)520-2344
Fax Number : (305)520-2400

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
MIAMI SUPERTOWER B LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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AUG 13 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MIAMI SUPERTOWER B LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

KOLLEEN COBB
Name of Person

Firm/Company

700 NW 1ST AVENUE, SUITE 1620
Address

MIAMI, FL 33136
City/State and Zip Code

KOLLEEN.COBB@FECI.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRIANNA HERNANDEZ at (305) 520-2427
Name of Contact Person Area Code Daytime Telephone Number

MAILING ADDRESS:
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:
Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy
- \$160.00 Filing Fee, Certificate of Status & Certified Copy

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. MIAMI SUPERTOWER B LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")

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

2. DELAWARE
(Jurisdiction under the law of which foreign limited liability company is organized)
3.
(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. 700 NW 1ST AVENUE, SUITE 1620
(Street Address of Principal Office)
6. 700 NW 1ST AVENUE, SUITE 1620
(Mailing Address)
MIAMI, FL 33136 MIAMI, FL 33136

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

Name: KOLLEEN O.P. COBB
Office Address: 700 NW 1ST AVENUE, SUITE 1620
MIAMI, Florida 33136
(City) (Zip code)

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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.

[Handwritten Signature]
(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: **Name and Address:**

Manager Name: KOLLEEN O.P. COBB

Member Address: _____

Authorized 700 NW 1ST AVENUE, SUITE 1620

MIAMI, FL 33136

 Person _____

Other _____ Other VP & S _____

Title or Capacity: **Name and Address:**

Manager Name: Mauricio H. Anderson

Member Address: _____

Authorized 700 NW 1ST AVENUE, SUITE 1620

MIAMI, FL 33136

 Person _____

Other _____ Other VP _____

Manager Name: Juan (Rusty) Godoy

Member Address: _____

Authorized 700 NW 1ST AVENUE, SUITE 1620

MIAMI, FL 33136

 Person _____

Other _____ Other VP, AS, T _____

Manager Name: _____

Member Address: _____

Authorized _____

 Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

 Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

 Person _____

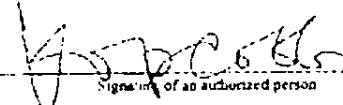
Other _____ Other _____

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Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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.



Signature of an authorized person

KOLLEEN O.P. COBB, VICE PRESIDENT

Typed or printed name of signer

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MIAMI SUPERTOWER B 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 SEVENTH DAY OF AUGUST, A.D. 2019.



A handwritten signature in black ink, appearing to read "JBULLOCK", written over a horizontal line. Below the line, the text "Jeffrey W. Bullock Secretary of State" is printed in a small font.

7183473 8300

SR# 20196394323

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

Authentication: 203370994

Date: 08-07-19