

2/14/22, 11:40 AM

Division of Corporations

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

From: Account Name : FLAGLER DEVELOPMENT GROUP, LLC
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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Foreign Limited Liability Company
Countyline Building 21 LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

2022 FEB 14 PM 4:53

FILED

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. Countyline Building 21 LLC
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," 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)
Miami, FL 33136
6. 700 NW 1st Avenue, Suite 1620
(Mailing Address)
Miami, FL 33136

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

Name: Kolleen O.P. Cobb, Esq.
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.

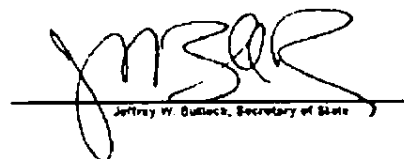
[Signature]
(Registered agent's signature)

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "COUNTYLINE BUILDING 21 LLC", FILED IN THIS OFFICE ON THE TENTH DAY OF FEBRUARY, A.D. 2022, AT 4:16 O'CLOCK P.M.



Jeffrey W. Bullock, Secretary of State

6611881 8100
SR# 20220460781

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

Authentication: 202646467
Date: 02-11-22

STATE OF DELAWARE
CERTIFICATE OF FORMATION
OF LIMITED LIABILITY COMPANY

The undersigned authorized person, desiring to form a limited liability company pursuant to the Limited Liability Company Act of the State of Delaware, hereby certifies as follows:

1. The name of the limited liability company is COUNTYLINE BUILDING 21 LLC

2. The Registered Office of the limited liability company in the State of Delaware is located at 251 Little Falls Drive (street), in the City of Wilmington, Zip Code 19808. The name of the Registered Agent at such address upon whom process against this limited liability company may be served is Corporation Service Company

By: /s/ Kolleen Cobb
Authorized Person

Name: Kolleen Cobb
Print or Type

State of Delaware
Secretary of State
Division of Corporations
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