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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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SECRETARY OF STATE TALLAHASSEE, FLORIOL

B. BOSTICK

JUL 2 7 2012

EXAMINER

CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE Second TALLAHASSEE, FL 32301 222-1173 FILING COVER SHEET ACCT. #FCA-14 **CONTACT: KATIE WONSCH** DATE: 07/26/2012 **REF. #:** 000174.170291 CORP. NAME: 120 OCEAN DRIVE, LLC () ARTICLES OF INCORPORATION · () ARTICLES OF AMENDMENT () ARTICLES OF DISSOLUTION () ANNUAL REPORT () TRADEMARK/SERVICE MARK () FICTITIOUS NAME (XX) FOREIGN QUALIFICATION () LIMITED PARTNERSHIP () LIMITED LIABILITY () REINSTATEMENT () MERGER () WITHDRAWAL () CERTIFICATE OF CANCELLATION () OTHER: STATE FEES PREPAID WITH CHECK# 100259 FOR \$ 125.00 **AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:** COST LIMIT: \$____ PLEASE RETURN: () CERTIFIED COPY () CERTIFICATE OF GOOD STANDING (XX) PLAIN STAMPED COPY () CERTIFICATE OF STATUS

Examiner's Initials

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1. 120 Ocean Drive, 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 and attach a copy of the writt consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") |
| 2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable) |
| 4. 05/15/2012 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") |
| 6. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) |
| 7. 2675 South Bayshore Drive, Coconut Grove, FL 33133 |
| (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here |
| 9. The name and usual business addresses of the managing members or managers are as follows: Pedro A. Martin, Manager, 2675 South Bayshore Drive, Coconut Grove, FID83133 |
| David P. Martin, Manager, 2675 South Bayshore Drive, Coconut Grove, FL 33133 |
| 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida:realestateinvestment |
| Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.) |

Gregory M. Marks, Authorized Representative

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, PLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| 1. The name of the Limited Liability Company is: 120 Ocean Drive, LLC | ". |
|--|----------|
| If unavailable, the alternate to be used in the state of Florida is: | |
| 2. The name and the Florida street address of the registered agent and office are: | • |
| Pedro A. Martin | |
| (Name) | |
| 2675 South Bayshore Drive | , |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) | T |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) Coconut Grove FL 33133 | greets: |
| City/State/Zip | |
| | · — |
| Having been named as registered agent and to accept service of process for the above stated finited of | |
| liability company at the place designated in this certificate, I hereby accept the appointment its register agent and agree to act in this capacity. I further agree to floribly with the provisions of all statutes | 'ea |
| relating to the proper and complete performance of professions, and I am familiar with and accept the obligations of my position as registered agent as professions in Chapter 608, Florida Statutes. | |
| obligations of my position as registered agent de publified for in Chapter 608, Florida Standes. | |
| (Signature) | |
| | |
| \$ 100.00 Filing Fee for Application | |
| \$ 25.00 Designation of Registered Agent | |

\$ 30.00 Certified Copy (optional)

5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "120 OCEAN DRIVE, 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 JULY, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "120 OCEAN DRIVE, LLC" WAS FORMED ON THE FIFTEENTH DAY OF MAY, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

12 JUL 26 AM 9: 36
SECREPARY OF STATE
TALLAHASSEE, FLORIDA

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AUTHENTYCATION: 9736463

DATE: 07-26-12

at corp.delaware.gov/authver.shtml