Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : FLAGLER DEVELOPMENT GROUP, LLC

Account Number : I20020000144 : (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 FS3 Building 4 LLC

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$130.00

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Corporate Filing Menu

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K. SALY EXAMINER JUN 29 2015

6/26/2015

COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT: FS3 Building 4 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:

Jessica Alvarez	
Name of Person	_
Florida East Coast Industries, LLC	
Firm/Company	
2855 Le Jeune Rd., 4th Floor	
Address	
Coral Gables, FL 33134	
City/State and Zip Code	_
essica.alvarez@feci.com	

For further information concerning this matter, please call:

Jessica Alvarez

₃₁,305

520-2366

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:

E-mail address: (to be used for future annual report notification)

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

Enclosed is a check for the following amount:

□ \$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:

(If name unavailable, enter alternate name adopted for the purpose of transacting busin Liability Company," "L.L.C," or "LLC.")	ess in Florida. The alternate name must include "Limited
_{2.} Delaware	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4.	
(Date first transacted business in Florida, if prio (See sections 605.0904 & 605.0905, F.S. to determ	
_{5.} 2855 Le Jeune Rd., 4th Floor	
Coral Gables, FL 33134	226
(Street Address of Principal O	
_{6.} 2855 Le Jeune Rd., 4th Floor	
Coral Gables, FL 33134	23
(Mailing Address)	*
7. The name, title or capacity and address of the person(s) who l	nas/have authority to manage is/are;
Chris Scott (P); Vincent Signorello (VP); D	aniel Marcus (VP);
Kolleen Cobb (VP, S); Juan (Rusty) Godoy	(VP, T);
Margarita M. Martinez (VP, AS)	
8. Attached is an original certificate of existence, no more than 90 having custody of records in the jurisdiction under the law of white acceptable. If the certificate is in a foreign language, a translation must be submitted) Signature of an authorized	ch it is organized. (A photocopy is not of the certificate under oath of the translator

Kolleen O.P. Cobb, Vice President

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	f the Limited Liability (Company is:	
If unavailable,	the alternate to be used	in the state of Florida is:	
2. The name a	nd the Florida street add	dress of the registered agent and office are:	TAIL BARASS
	Kolleen O.P.	. Cobb	85 8 m
		(Name)	一点星七
	2855 Le Jeu	ne Rd., 4th Floor	8: 23 8: 23
	Florida Stre	cet Address (P.O. Box NOT ACCEPTABLE)	5-0
	Coral Gables	FL 33134	
		City/State/Zip	

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

(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

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FS3 BUILDING 4 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 JUNE, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FS3 BUILDING 4 LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF APRIL, A.D. 2014.

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

5521636 8300

150882600

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

AUTHENTY CATION: 2441053

DATE: 06-05-15