Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000240740 3)))



H150002407403ARCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)205-8842

Fax Number : (850)878-5368

*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 VEREIT MT Panama City FL, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

K.SNLY Examiner OCT 8 2015 10/7/2015 2:27:43 PM From: To: 8506176383(2/4)

erry.

COVER LETTER

	ation Section n of Corporatio	ns						
VE SUBJECT:	EREIT MT PAN	ama city fl, llc						
· <u></u>		Name of	Limited Liability	Company				
The enclosed "A Existence, and cl	pplication by Fo	reign Limited Liability Com ed to register the above refer	pany for Authoriz renced foreign lim	ation to Tr ited liabilit	ansact Business in Florida," Ce y company to transact business	ertificate of in Florida		
Please return all	correspondence	concerning this matter to the	following:					
	катні sime	NS						
	Name of Person							
	VEREIT, INC.							
	T	F	irm/Company					
	2325 EAST CAMELBACK ROAD, SUITE 1100							
			Address		<u> </u>			
	PHOENIX, AZ	85016						
		City/S	tate and Zip Code					
1	KSimens@VER	EIT.com	•					
_		E-mail address: (to be use	d for future annua	report not	ification)			
For further inform	nation concernin	g this matter, please call:						
Tambre	Ruud		602 at (778-62	73			
	Name o	f Contact Person	Area Code	Day	time Telephone Number			
	NG ADDRESS: of Corporations			STREET Division	ADDRESS: of Corporations			
Registrat P.O. Box	tion Section			Registrati Clifton B	ion Section			
	see, FL 32314			2661 Exe	ecutive Center Circle ee, FL 32301			
Enclosed is a chec	ck for the follow	ing amount:		•				
■ \$ 125.0	00 Filing Fee	S130.00 Filing Fee & Certificate of Status	☐ \$155,00 Filir Certified Copy		☐ \$160.00 Filing Fee, Certified Copy	icate		

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.

, VEREIT MT PANAM	la city fl, llc	•		
(Name of For	eign Limited Liability Company; mus	t include "Limited Lia	bility Company," "L.L.C.," or "I	LLC.")
(If name unavailable, enter a	ulternate name adopted for the purpose ," or "LLC.")	of transacting busines	s in Florida. The alternate name	must include 'Limited
2. DELAWARE		•		
	of which foreign limited liability	3. <u> </u>	(FEI number, if applicable)	***************************************
4				
	(Date first transacted busines (See sections 605.0904 & 605.0	is in Florida, it prior to 1905, F.S. to determine	registration.) pennity liability)	
5. CO VEREIT, INC.	,			
2325 EAST CAMELB	ACK ROAD, SUITE 1100, PHO	ENIX, AZ 85016		
 	(Sirect Address of Pi			~ B
6. C/O VEREIT, INC.	•			巴巴 五一
2325 EAST CAMELE	BACK ROAD, SUITE 1100, PHO	ENIX AZ 85016		2015 OCT -7
	(Mailing A			艺 1. 「
7 Name and assess address	· -		LLA	m~ 1
7. Name and speet address	ss of Florida registered agent: (P.C C T Corporation System	D. Box NOT accept	adic)	T9 景
Name:	C 1 Corporation System		•	15 66
Office Address:	1200 South Pine Island Road			S. 55
	Plantation		. Florida 33324	3 ()
	(City)		(Zip code)	
Registered agent's accep-				
	gistered agent and to accept servi tion, I hereby accept the appointn			
	ons of all statutes relative to the p nv position as revistered avent.			
accept the obligations of n			•	
:	By: Canal Bun	item	<u>Assistant Secret</u>	oru
	Register	ed agent's signature)	The state of the s	7 Y
8. The name, title or caps	city and address of the person(s) v	vho has/have authori	tv to manage is/are:	
•	COME STRATEGY (DAILY NA		-	
	lback Rd., Ste. 110	~~~~		
	of existence, no more than 90 days			
of the translator must be su	of which it is organized. (If the centle)	inicate is in a foreig	n ianguage, a transialion of th	ie certificate under dath
	Signature of	f an authorized person		
. .	-	•		
Inis document is executed submitted in a document to	in accordance with section 605.02 the Department of State constitute	03 (1) (b), Florida S is a third degree felor	tatutes. I am aware that any fa	ulse information
	Todd J. Weiss, Authorize		p. 0 11000 tot 111 2:01 1:12	-, -, -, -, -, -, -, -, -, -, -, -, -, -

Typed or printed name of signee

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VEREIT MT PANAMA CITY FL, 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 SIXTH DAY OF OCTOBER, A.D. 2015.

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

5839851 8300 SR# 20150396223

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

Authentication: 10187229

Date: 10-06-15