Division of Corporations

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Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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Foreign Limited Liability Company 209 Pine Street Associates, LLC

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S. ROBERTS

OCT 2 7 2022

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

→ 18506176383

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: 209 Pine Street Associates, 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," "LLC," or "LLC," or "LLC," Delaware (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 430 Park Avenue, 12th Floor 430 Park Avenue, 12th Floor (Mailing Address) (Street Address of Principal Office) New York, NY 10022 New York, NY 10022 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporate Creations Network Inc. Name: 801 US Highway I Office Address: 33408 North Palm Beach (Cuy) 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. Erin Saville, Special Secretary (Registered agent's signature)

⊙ 10/27/2022 12:00 PM

Title or Capacity:	Name and Address: N Flagler Drive Developer, LLC	Title or Capacity:		Name and Address: Christopher Schlank
☐ Manager ■ Member	Name:	☐ Manager ☐ Member ☐ Authorized		430 Park Avenue, 12th Floor New York, NY 10022
□Authorized				
Person		Person		
□Other	Other	Other Authorized	1 Signator	Other
□Manager	Name:	□Manager	Name: _	
☐Member	Address:	□Member	Address	
□Authorized		□Authorized		
Person		Person	 -	
□ Other	Other	Other		Other
□Manager	Name:	□Manager	Name: _	
□Member	Address:	□Member	Address	
□Authorized		□Authorized		
Person		Person		
Other		Other		Other
9. Attached is a cer jurisdiction under to of the translator mu	Use an attachment to report more than six (6). Is may be added to the index when filing your Intificate of existence, no more than 90 days old the law of which it is organized. (If the certificate be submitted) is executed in accordance with section 605.02 ament to the Department of State constitutes a second constitutes.)	Florida Department of Stat I, duly authenticated by the ate is in a foreign languag (03 (1) (b), Florida Statute	e Annual c official h c, a transit s. I am aw	Report form. Naving custody of records in the stion of the certificate under oath are that any false information

Typed or printed name of signer

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "209 PINE STREET ASSOCIATES, 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 OCTOBER, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "209 PINE STREET ASSOCIATES, LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF JULY, A.D. 2021.

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

Authentication: 204708307

Date: 10-26-22