Division of Corporations

## LOOGOOZ82 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.

(((H16000301873 3)))



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 : FCA00000023

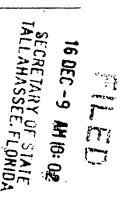
Phone : (614)280-3338 : (954)208-0845

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## FLORIDA/FOREIGN LP/LLLP STARWOOD CAPITAL GROUP GLOBAL II, L.P.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$1,052.50



Electronic Filing Menu

Corporate Filing Menu

Help

## APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

1. Starwood Capital Group Global II, L.P.		
(Name of Limited Partnership or Limited Acceptable Limited Partnership suffixes: Limited Partnership suffixed Partnership or Limited Partner	Linblity Limited Partnership, which must includ artnership, Limited, L.P., LP, or Ltd. fixes: Limited Liability Limited Partnership, L.L.L.P	
If name unavailable, name under which the limited business in	partnership or limited liability limited partnership pro-	oposes to register to transact
2 Delaware	3 08/06/2014	
State or Country of Formation	Date of Formation	
4. Federal Employer Identification Number: 47-16	574916	
5. Name of Registered Agent for Service of Proces		
C T Corporation System	٦	
1200 South Pine Island Road	]	
Plantation, Florida 33324	J	
of all statutes relative to the proper and complete my position as registered agent. CT Compon By:	ent and agree to act in this capacity. I further agree performance of my duties, and I am familiar with an ation System	to comply with the provisions in accept the obligations of
\$	Mgnature of Registered Agent	A SE
7. Principal Office:	8. Mailing Address:	66 AAR
1601 Washington Avenue, #800	1601 Washington Avenue, #800	AHAA
Miami Beach, FL 33139	Miami Beach, FL 33139	SS -9
		TO RE IN
9. If limited partnership is a limited liability limit 10. Name, principal office address, and malling		HIO: ORID.
Name of General Partner: SCGG II GP, L.L.C.	Name of General Partner:	
1601 Washington Avenue, #8	nn	
Street Address: Miami Beach, FL 33139	Street Address:	
Mailing Address: 1601 Washington Avenue, #8	00 Mailing Address:	
Miami Beach, FL 33139		
Name of General Partner:	Name of General Partner;	
Mailing Address:	Mailing Address:	

Street Address:  Mailing Address:  Mailing Address:  Mailing Address:  Effective date, if other than the date of filling:  Effective date cannot be prior to nor more than 90 days after the date this document is fill  12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to food Department of State, by the Secretary of State or other official having custody of the law of which it is organized.  Signed this  By SCGG II GP, L.L.C., its general  Signature of a general partner	ed by the Florida Department of State.)
1. Effective date, if other than the date of filling:  Effective date cannot be prior to nor more than 90 days after the date this document is fill  12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to florida Department of State, by the Secretary of State or other official having custody of the law of which it is organized.  Signed this  Age of December 20 16  By SCGG II GP, L.L.C., its general	ed by the Florida Department of State.)
1. Effective date, if other than the date of filing:  Effective date cannot be prior to nor more than 90 days after the date this document is filed that the date of existence duly authenticated, not more than 90 days prior to florida Department of State, by the Secretary of State or other official having custody of the law of which it is organized.  Signed this	
Florida Department of State, by the Secretary of State or other official having custody of the law of which it is organized.  Signed this	the delivery of this application to the
By SCGG II GP, L.L.C., its general	he entity's records in the jurisdiction under
	partner
Clanature of a general norther	
Signature of a general partner  Nick Antonopoulos - Authorized I The individual signing this document affirm that the facts stated herein are true and the in submitted in a document to the Department of State constitutes a third degree felony as pr	dividual is aware that false information
Filing Fees: \$1,000.00 (\$965 Filing Feet Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	e and \$35 Registered Agent Fee)
Page 2 of 2	16 BEC SECRET
	SSE SSE
•	OF STATE

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "STARWOOD CAPITAL GROUP GLOBAL II,

L.P." 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 EIGHTH DAY OF DECEMBER, A.D. 2016.

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

5581771 8300 SR# 20166967808 Authentication: 203470257

Date: 12-08-16