

Division of Corporations

**B180000779893**Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : BILZIN, SUMBERG BAENA PRICE & AXELROD LLP  
Account Number : 075350000132  
Phone : (305) 374-7560  
Fax Number : (305) 351-2122

\*\*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  
Sunshine State Certificates VII, LLLP

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$1,061.25

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

H18000077989 3

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

1. Sunshine State Certificates VII, LLLP  
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)  
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.  
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.  
or LLLP.

If name unavailable, name under which the limited partnership or limited liability limited partnership  
proposes to register to transact business in Florida; must contain acceptable suffix.

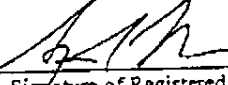
2. Delaware 3. \_\_\_\_\_  
State or Country of Formation Date of Formation

4. Gary I. Branse  
Name of Registered Agent for Service of Process

5. 7900 Miami Lakes Drive West  
Florida street address for Registered Agent

Miami Lakes, FL 33016

6. 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.

  
Signature of Registered Agent

7. 7900 Miami Lakes Drive West  
Principal office address

Miami Lakes, Florida 33016

8. If limited partnership is a limited liability limited partnership, check box ☒

H18000077999 3

9. 7900 Miami Lakes Drive West  
(Mailing address)

Miami Lakes, Florida 33016

10. Name, principal office address, and mailing address of each general partner:

Sunshine State Manager VII, LLC  
Name

7900 Miami Lakes Drive West  
Street Address  
Miami Lakes, Florida 33016

7900 Miami Lakes Drive West  
Mailing Address  
Miami Lakes, Florida 33016

Name \_\_\_\_\_

Street Address

Mailing Address

Name \_\_\_\_\_

Street Address

Mailing Address

Name \_\_\_\_\_

Street Address

Mailing Address

H18000077989 3

_____ Name	_____ Street Address
_____ Name	_____ Mailing Address
_____ Name	_____ Street Address
	_____ Mailing Address

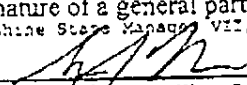
11. Effective date, if other than the date of filing: \_\_\_\_\_

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 8<sup>th</sup> day of March, 2018.

Signature of a general partner:  
Sunshine State Manager, VII, LLC, General Partner

By:   
By: Gary I. Branse, Vice President

Filing Fees:	\$1,000.00 (S965 Filing Fee and S35 Registered Agent Fee)
Certified Copy (optional):	\$ 52.50
Certificate of Status (optional):	\$ 8.75

H18000077989 3

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SUNSHINE STATE CERTIFICATES VII, LLLP" 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 NINTH DAY OF MARCH, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SUNSHINE STATE CERTIFICATES VII, LLLP" WAS FORMED ON THE EIGHTH DAY OF MARCH, A.D. 2018.

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



6786955 8300

SR# 20181310586

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202288168

Date: 03-09-18

H18000077989 3