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| | | TRANSMITTAL LETTER | | |
|-------------|--|--|--|--|
| | gistration Section vision of Corporations | | | |
| SUBJEC | r: Aventi Investors LLC | | _ | |
| | 1) | Name of Limited Liability Company) | | |
| Florida," (| | Limited Liability Company for Authorization to To check are submitted to register the above reference in Florida | | |
| Please reti | urn all correspondence conce | erning this matter to the following: | | |
| | Eileen R | t. Ferrara | | |
| | • •• | (Name of Person) | | |
| | Amold & Porte | er LLP | | |
| | | (Firm/Company) | | |
| | | • | ₹., 23 | |
| | 555 Twelfth S | itreet, NW | ECF INA H | |
| | | (Address) | 2004 HOY 12 PH SECRETARY OF TALLAHASSEE, I | |
| | | | 2 SEE | |
| | Washington, ! | DC 20004 | _ 异豆 | |
| | | (City/State and Zip Code) | 2 PH 3: 02 2 PH 3: 02 EF, FLORID | |
| For furthe | r information concerning thi | is matter, please call: |)2 DA | |
| | Eileen Ferrara | at (202) 942-5498 | | |
| | (Name of Perso | n) (Area Code & Daytime Telephone | Number) | |
| | REET ADDRESS: | MAILING ADDRESS: | | |
| | Registration Section Registration Section Division of Corporations Division of Corporations | | | |
| | 409 E. Gaines Street P.O. Box 6327 | | | |
| | llahassee, Florida 32399 | Tallahassee, Florida 32314 | | |
| Enclosed i | s a check for the following a | amount: | | |
| | 1125.00 Filing Fee ☐ \$130.00 | | ng Fee, Certificate Status & Certified Copy | |

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| Aventi investors LLC (Name of Foreign Limited | Li | ibility Company) | |
|---|------------|--|------------|
| Celaware | 3 | 20~1826725 | |
| (Jurisdiction under the law of which foreign limited liability company is organized) | .J. | (FEI number, if applicable) | |
| November 8, 2004 | ₹ | December 31, 2053 | |
| (Date of Organization) | ×. | (Duration: Year limited liability company will cease to exist or "perpetual") | - |
| Upon registration | | | |
| (Date first transacted business in F (See sections 608.501 & 608.502 F. | | | |
| 5005 LBJ Freeway, Suite 1130, Dallas, TX 75244 | | | |
| | | = | 4 |
| (Street Addres | 5 O | Principal Office) | <u>-</u> K |
| If limited liability company is a manager-manage | d c | ompany, check here | |
| . The name and usual business addresses of the ma | nag | ging members or managers are as follows: | SS: |
| Falcon Real Estate Investment Co., 5005 LBJ Fr | | | <u> </u> |
| | | | - [] |
| | | | 골 |
| | | | Ä |
| والمراجعة | | | • |
| Attached is an original certificate of existence, no more than 90 rejurisdiction under the law of which it is organized. (A photoco ranslation of the certificate under oath of the translator must be suit | руi | s not acceptable. If the certificate is in a foreign language, a | ords i |
| 1. Nature of business or purposes to be conducted of | or p | promoted in Florida: Ownership, lease and sale | |
| of condominiums in the Miami ares. | | | |
| Wand | 20 | arter | |
| Signature of a member or an at (in accordance with section 608.408(3), an affirmation under the penalties of per | F.S., | orized representative of a member. , the execution of this document constitutes that the facts stated herein are true. | |
| | | iber, by David A. Hill, its President | |

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| 1. The name of | of the Limited Liability Cor | mpany is: | |
|--|---|---|--|
| Av | enti Investors LLC | - | |
| 2. The name | and the Florida street addres | ss of the registered agent and office are: | |
| | Corporation Service | Company | |
| | | (Name) | |
| | 1201 Hays Street | | 2004 SEC |
| | Florida Street A | Address (P.O. Box NOT ACCEPTABLE) | ART TO |
| | Tallahassee | FL 32301 | LE 12 NRY (|
| | | City/State/Zip | PH ST FLO |
| liability compo agent and agra relating to the obligations of | any at the place designated in see to act in this capacity. I fi proper and complete perfor | nd to accept service of process for the above stin this certificate, I hereby accept the appointm further agree to comply with the provisions of a mance of my duties, and I am familiar with an ent as provided for in Chapter 608, Florida St | ated limited nent as registered all statutes ad accept the |

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AVENTI INVESTORS 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 EIGHTH DAY OF NOVEMBER, A.D. 2004.

FILED 2004 HOV 12 PM 3: 02 SECRETARY OF STATE SECRETARY OF STATE



Warriet Smith Hindson

AUTHENTICATION: 3461535

DATE: 11-08-04

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