

M05000005844

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

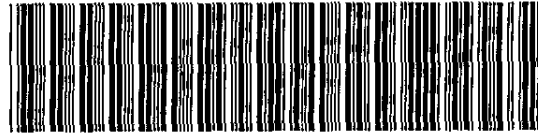
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05 OCT 18 PM 1:40  
SECURITY STATE  
TALLAHASSEE, FLORIDA

REC'D JPM  
05 OCT 18 PM 11:06  
DIVISION OF REGISTRATION

DEPARTMENT OF STATE  
ACCOUNT FILING COVER SHEET

Account Number FCA000000017

Reference:  
(Sub Account)

Date:

10/18/05

Requestor Name:

Carlton Fields

Address:

Post Office Drawer 190  
Tallahassee, Florida 32302

Telephone:

(850) 224-1585

Contact Name:

Kim Pullen, CLA (ext. 5261)

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05 OCT 18 PM 1:40  
TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE

Corporation Name:

SG Mirasol II LLC

Entity Number:

Authorization:

Kim Pullen

☒

Certified Copy

☒

New Filings

☐

Fictitious Name

☐

Plain Stamped Copy

☐

Amendments

☐ Certificate of Status

☐ Annual Report

☐ Registration

( X ) Call When Ready

( X ) Call if Problem

( ) After 4:30

( X ) Walk In

( ) Will Wait

( X ) Pick Up

CF Internal Use Only

Client: 50102

Matter: 24054

Name: U. Dughn

Office: TPA

DEPARTMENT OF STATE  
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Certified Copy

☐ Certificate of Status

☒

New Filings

☐ Plain Stamped Copy

☐ Annual Report

☐ Fictitious Name

☐ Amendments

☐ Registration

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CF Internal Use Only

Client:

50102

Matter:

24054

Name:

D. Dughn

Office:

TPA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SG Mirasol II LLC  
(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Lavinia James Vaughn, Esquire  
(Name of Person)

Carlton Fields  
(Firm/Company)

Corporate Center Three at International Plaza, 4221 W. Boy Scout Blvd., 10th Floor  
(Address)

Tampa, FL 33607  
(City/State and Zip Code)

For further information concerning this matter, please call:

Lavinia James Vaughn, Esquire at ( 813 ) 229-4144  
(Name of Person) (Area Code & Daytime Telephone Number)

**MAILING ADDRESS:**  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☒ \$155.00 Filing Fee & Certified Copy    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

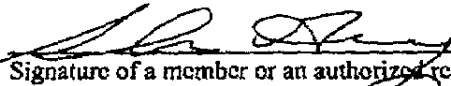
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TALLAHASSEE, FLORIDA

005715

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. SG Mirasol II LLC  
(Name of Foreign Limited Liability Company)
2. Delaware  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. \_\_\_\_\_  
(FEI number, if applicable)
4. April 26, 2005  
(Date of Organization)
5. Perpetual  
(Duration: Year limited liability company will cease to exist or "perpetual")
6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 11502 Villa Vasari Drive  
Palm Beach Gardens, FL 33418  
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here ☒
9. The name and usual business addresses of the managing members or managers are as follows:  
Sharon Gray  
11502 Villa Vasari Drive  
Palm Beach Gardens, FL 33418
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: \_\_\_\_\_  
Ownership and leasing of real property.

  
Signature of a member or an authorized representative of a member.  
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Sharon Gray, Sole Member

Typed or printed name of signee

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05 OCT 18 PM 1:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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 the Limited Liability Company is:

SG Mirasol II LLC

2. The name and the Florida street address of the registered agent and office are:

CFRA, LLC

(Name)

Corporate Center Three at International Plaza, 4221 W. Boy Scout Blvd., 10th Floor

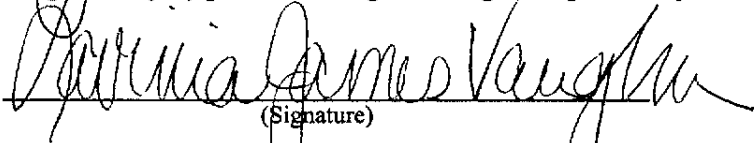
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Tampa

FL 33607

City/State/Zip

*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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.*

  
(Signature)

Lavinia James Vaughn, Esq. on behalf of CFRA, LLC

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

# Delaware

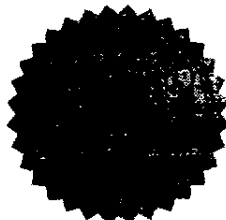
PAGE 1

## *The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SG MIRASOL II 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 THIRTEENTH DAY OF OCTOBER, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SG MIRASOL II LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF APRIL, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

3960929 8300

AUTHENTICATION: 4224966

050839195

DATE: 10-13-05