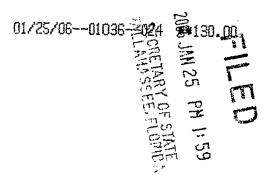
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COVER LETTER

(Name of Limited Liability Company)

TO:

Registration Section Division of Corporations

SUBJECT: Sea Shelter IX, LLC

The enclosed "Application by Foreign Limited Liability Florida," Certificate of Existence, and check are submitted liability company to transact business in Florida		
Please return all correspondence concerning this matter t	o the following:	
Thomas Caufmann, Preside		
(Name of	PER B	
Capital Advantage Finance and Development, Inc.		
(Firm/Co	ma R	
1000 William Hilton Parkway, Suite 101		
(Address)		
Hilton Head Island, South (City/State and For further information concerning this matter, please ca	d Zip Code)	
Thomas Caufmann at (843 785-5559	
	Area Code & Daytime Telephone Number)	
Division of Corporations P.O. Box 6327 Clift Tallahassee, FL 32314 266	EET ADDRESS: sion of Corporations on Building Executive Center Circle ahassee, 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 & \$\Boxed{1}\$160.00 Filing Fee, Certificate} Certified Copy of 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:

1. <u>S</u>	ea Shelter IX, LLC
	(Name of Foreign Limited Liability Company)
(Jur	outh Carolina isdiction under the law of which foreign limited liability 3. 20-4091658 (FEI number, if applicable)
com	pany is organized)
4. Ja	anuary 6, 2006 5. Perpetual
	(Date of Organization) (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) 000 William Hilton Parkway, Suite 101
7. 1	000 William Hilton Parkway, Suite 101
·· —	77 N
<u> </u>	Hilton Head Island, South Carolina 29928 (Street Address of Principal Office)
	(Street Address of Principal Office)
8. If	limited liability company is a manager-managed company, check here
9. Th	ne name and usual business addresses of the managing members or managers are as follows:
	Capital Advantage Finance and Development, Inc.
-	1000 William Hilton Parkway, Suite 101
<u> </u>	Hilton Head Island, South Carolina 29928
the juri	tached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records i sdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a tion of the certificate under oath of the translator must be submitted.)
11. N	Nature of business or purposes to be conducted or promoted in Florida: Purchase, Develop-
r	ment, Management and Sale of Real Property
	Momas autonam
	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.)
	Thomas Caufmann, 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 the Limited Liability Company is:	
Sea Shelter IX, LLC	
2. The name and the Florida street address of the registered agent and office	are:
Andrew D. Tarr, Esquire	7.00°
(Name)	ECR. T
305 West Hallandale Beach Boulevard	2006 JAN 25 SECRETAR TALLAHASS
Florida Street Address (P.O. Box NOT ACCEPTABLE)	1000 平
Hallandale Beach, FL 33009	1: 59
OKJ/SAKO DIP	******
Having been named as registered agent and to accept service of process for the liability company at the place designated in this certificate, I hereby accept the agent and agree to act in this capacity. I further agree to comply with the provi relating to the proper and complete performance of my duties, and I am familiar obligations of my position as registered agent as provided for in Chapter 608, F	appointment as registered sions of all statutes r with and 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)

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

SEA SHELTER IX, LLC, A Limited Liability Company duly organized under the laws of the State of South Carolina on January 6th, 2006, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-44-809 of the South Carolina Code, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 6th day of January, 2006.

Mark Hammond Secretary of State