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ON OF CORPORATIONS

COVER LETTER

TO: Registration Section

Division of Corporations	
SUBJECT: City Place Aventura Land Hold	dings, LLC
(Name of Limited Liabili	
The enclosed "Application by Foreign Limited Liability Com Florida," Certificate of Existence, and check are submitted to liability company to transact business in Florida	
Please return all correspondence concerning this matter to the	following:
Gary I. Nesbitt	
(Name of Pers	on)
Fromberg, Perlow & Kornik P.	.A.
(Firm/Compan	ny)
18901 NE 29 Ave Suite#100	
(Address)	
Aventura, FL 33180	
(City/State and Zip	Code)
For further information concerning this matter, please call:	
Gary I Nesbitt at (30	05 933-2000 Code & Daytime Telephone Number)
(Name of Person) (Area	Code & Daytime Telephone Number)
Division of Corporations Division P.O. Box 6327 Clifton B	F ADDRESS: of Corporations duilding ecutive Center Circle
,	see, FL 32301
Enclosed is a check for the following amount: \$\Bigsim \mathbb{\text{\$125.00 Filing Fee}} \Bigsim \mathbb{\text{\$130.00 Filing Fee}} & \Bigsim \mathbb{\text{\$\$155.0}} \text{Certificate of Status}	0 Filing Fee & ✓\$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 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1	City Place Aventura Land Holdings, LLC		
•	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC	:.")	
CC	f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a coponsent of the managers or managing members adopting the alternate name. The alternate name must include "Limite ompany," "L.L.C.," "LLC.")		
2.	Delaware 3, 20-8827354		
	(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)		_
4.	O4/05/2007 (Date of Organization) 5. perpetual (Duration: Year limited liability company will converted to the converted liability company will converted to the converted liability company will converted liability converted liabilit	ease t	
6.	NA		
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		
7.	Sky Development, Inc		
	2999 NE 191 Street PH2 Aventura, FL 33180		
	(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:		
	Aventura Land Trust, LLC a Florida		
	Limited Liability Company 2999 NE 191 St PH2		<u> </u>
	Aventura, FL 33180		
th tra	O. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custo be jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign languarslation of the certificate under oath of the translator must be submitted.) 1. Nature of business or purposes to be conducted or promoted in Florida: Real Estate	•	
		0	<u>=</u>
	Morion	7 AUG	HOUST PLOSE
		<u></u>	FIL EI
	GARY NX 53 TH	PHI 12:	. S.1
	Typed/or printed name of signee	6.3	즐걸

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:		
City Place Aventura Land Holdings, LLC		
If name unavailable, the alternate name to be used in the state of Florida is:		
2. The name and the Florida street address of the registered agent and office are:		

Dade County Corporate Agents, Inc
(Name)
18901 NE 29 Ave Suite#100
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Aventura, FL 33180 _{FL}

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.

They WHOM (Signature)

\$ 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 "CITY PLACE AVENTURA LAND HOLDINGS, 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 AUGUST, A.D. 2007.

LAYS OF THE PARTY OF THE PARTY

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070915293

Harriet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5922895

DATE: 08-13-07