MU90000 4042

| • |
|---|
| (Requestor's Name) |
| (Address) |
| (Address) |
| (Addless) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Business Emity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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EXAMINER





| ON SERVICE COMPANY. | |
|--|--------------|
| ACCOUNT NO. : 12000000195 | SIND ON SIND |
| REFERENCE : 153782 5024449 | 3 |
| AUTHORIZATION Linebole name | رن ر |
| COST LIMIT \$ 125.00 | |
| ORDER DATE: October 13, 2009 | |
| ORDER TIME : 1:08 PM | |
| ORDER NO. : 153782-005 | |
| CUSTOMER NO: 5024449 | |
| * | |
| FOREIGN FILINGS | |
| NAME: FL 6801 COLLINS CENTRAL LLC | |
| XXXX QUALIFICATION (TYPE: LL) | |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: | |
| CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING | |

EXAMINER:

CONTACT PERSON: Carina L. Dunlap -- EXT# 2951

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

| IN COMPLIANCE WITH SECTION 608503, FLORIDA STATU LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN TE | TES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIG IE STATE OF FLORIDA: ———————————————————————————————————— |
|--|--|
| FL 6801 Collins Central LLC | 990 |
| (Name of Foreign Limited Liability Company; must inc | THE THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN IE STATE OF FLORIDA: Stude "Limited Liability Company," "L.L.C.," or "LLC.") |
| (If name unavailable, enter alternate name adopted for the purp | pose of transacting business in Florida and attach a copy of the write tternate name. The alternate name must include "Limited Liability" |
| _{2.} DE | 3. <u>n/a</u> |
| (Jurisdiction under the law of which foreign limited liability company is organized) | (FEI number, if applicable) |
| 4. 10/9/09 | 5. perpetual |
| (Date of Organization) | (Duration: Year limited liability company will cease to exist or "perpetual") |
| 6. upon filing this form | |
| (Date first transacted business in 1 (See sections 608,501 & 608,502 F | lorida, if prior to registration.) S. to determine penalty liability) |
| 7. 1271 6th Avenue, New York, NY 10020 | |
| | |
| (Street Addre | ss of Principal Office) |
| 8. If limited liability company is a manager-manage | ed company, check here |
| 9. The name and usual business addresses of the ma | inaging members or managers are as follows: |
| sole member: FL 6801 Spirits LLC | |
| 1271 6th Avenue, New York, NY 10020 | |
| | |
| 10. Attached is an original certificate of existence, no more than 9 the jurisdiction under the law of which it is organized. (A photocotranslation of the certificate under each of the translator must be su | |
| 11. Nature of business or purposes to be conducted | or promoted in Florida: |
| To own the central tower located at 6801 (| Collins Avenue, Miami, Florida |
| | |
| | authorized representative of a member. |
| | , F.S., the execution of this document constitutes erjury that the facts stated herein are true.) |
| Aaron Guth, Authorized | |

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.

| If name unavailable, the alternate name to be used in the state of Florida is: | | | | | |
|--|---|---|----------|--|--|
| 2. The name | and the Plorida street addres | s of the registered agent and office are: | <u>*</u> | | |
| | Corporation Service C | Company | | | |
| | 4 | (Name) | • | | |
| | 1201 Hays Street | | | | |
| | Florida Street A | ddress (P.O. Box NOT ACCEPTABLE) | • | | |
| | Tallahassee | _{EI} 32301 | | | |
| | | 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. Thereby 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.

Corporation Service Company

BY: Carina L. Dunlap

Asst. Vice President

\$ 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, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "FL 6801 COLLINS CENTRAL 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.

2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FL 6801 COLLINS CENTRAL LLC" WAS FORMED ON THE NINTH DAY OF OCTOBER, A.D. 2009.

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

4740371 8300

090930129

AUTHENTY CATION: 7579806

DATE: 10-13-09

You may verify this certificate online at corp.delaware.gov/authver.shtml