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EXAMINER

SECRETARY OF STATE ON STATE OF CORPORATIONS



ACCOUNT NO. : I2000000195

REFERENCE: 539722

7294880

AUTHORIZATION

COST LIMIT :

ORDER DATE: October 12, 2010

ORDER TIME : 4:39 PM

ORDER NO. : 539722-005

CUSTOMER NO: 7294880

FOREIGN FILINGS

NAME: FIFTEEN NAPLES INVESTORS LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

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

EXAMINER:

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.

	Fifteen Naples Investors LLC						
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")							
co Co 2.	Fname unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written nsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C.," "LLC.") Delaware [Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)						
	(Duration: Year limited liability company will cease to						
6.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)						
7.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) c/o Fifteen Group, 1680 Meridian Ave, Suite 303, Miami Beach, FL 33139						
	(Street Address of Principal Office) If limited liability company is a manager-managed company, check here ⊠ The name and usual business addresses of the managing members or managers are as follows: FG Managing Member, Inc. c/o Fifteen Group, 1680 Meridian Ave, Suite 303, Miami Beach, FL 33139						
the trai	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a nslation of the certificate under oath of the translator must be submitted.)						
11	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.) Chris Macconnell						

Typed or printed name of signce

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 Florida street address of the registered agent and office are: Corporation Service Company (Name) 1201 Hays Street Florida Street Address (P.O. Box NOT ACCEPTABLE)		of the Limited Liability Cor bles Investors LLC		
Corporation Service Company (Name) 1201 Hays Street Florida Street Address (P.O. Box NOT ACCEPTABLE)	If name unav	ailable, the alternate name to	be used in the state of Florida is:	
(Name) 1201 Hays Street Florida Street Address (P.O. Box NOT ACCEPTABLE)	2. The name	and the Florida street addre	ss of the registered agent and office are:	
1201 Hays Street Florida Street Address (P.O. Box NOT ACCEPTABLE)		Corporation Service	Company	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	(Name)			•
		1201 Hays Street		
		Florida Street A	address (P.O. Box <u>NOT</u> ACCEPTABLE)	•
Tallahassee _{FL} 32301		Tallahassee	FL 32301	
City/State/Zip	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.

Corporation Service Company

BY: COULL

(Signature) Sonya L. Cordell

Assistant VP

\$ 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 "FIFTEEN NAPLES 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 TWELFTH DAY OF OCTOBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FIFTEEN NAPLES INVESTORS LLC" WAS FORMED ON THE FOURTH DAY OF OCTOBER, A.D. 2010.

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

4880261 8300

100988369

Jeffrey W. Bullock, Secretary of State

AUTHENTYCATION: 8283770

DATE: 10-12-10

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