# M1000004641

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bı	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
•		

Office Use Only



200185839122

10/21/10--01003--008

\*\*125.00

DEPAR ENERT OF STATE
DIVISION OF CORPORATIONS
TALLANASSEE, FLORIDA

RECEIVED

B. KOHR

OCT 2 1 2010

**EXAMINER** 

10 OCT 21 AM 11: 35

CORPORATE ACCESS, INC.

"When you need ACCESS to the world"

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066)

(850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

		WALK IN	
		PICK UP: 10 21 E.G.	
		CERTIFIED COPY	Total Control
	×	PHOTOCOPY	_
		CUS	
	×	FILING LLC	_
1.	(CO)	PORATE NAME AND DOCUMENT #)	
2.	(COI	RPORATE NAME AND DOCUMENT #>	
3.	(COR	RPORATE NAME AND DOCUMENT #)	<del></del>
4.	(COR	PORATE NAME AND DOCUMENT #)	<del></del>
<b>5</b> .	COR	PORATE NAME AND DOCUMENT #)	
6.	(COR)	PORATE NAME AND DOCUMENT #)	
SPE	CIAL INST	TRUCTIONS:	<del></del>

### 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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA;
1. PACIFICA L SIXTEEN LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If now a unavoidable anter altonote name all to the state of the stat
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability
Company," "L.L.C," "LLC.")
2. DELAWARE 3. 4710447
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. JULY 16, 2009 5. DECEMBER 31, 2060
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6
6. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)  7.
7
1785 HANCOCK ST. STE. 100 SAN DIEGO, CA 92110
(Street Address of Principal Office)
1785 HANCOCK ST. STE. 100 SAN DIEGO, CA 92110  (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:
ASHOK ISRANI, 1785 HANCOCK ST. STE. 100, SAN DIEGO, CA 92110
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:
REAL ESTATE INVESTMENTS
TEAL ESTATE HIVESTIFICATION
At charing
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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)
DEEPAK ISRANI, AUTHORIZED REPRESENTATIVE

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.

•
-

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)

\$ 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 "PACIFICA L SIXTEEN 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 FIFTEENTH DAY OF OCTOBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PACIFICA L SIXTEEN LLC" WAS FORMED ON THE SIXTEENTH DAY OF JULY, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4710447 8300

100999983

DATE: 10-15-10

You may varify this certificate onlin at corp. delaware.gov/authver.shtml

Jeffrey W. Bullock, Secretary of State
THENTICATION: 8292383