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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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From:

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: BILZIN SUMBERG BAENA PRICE & AXELROD LLP

Account Number: 075350000132

: (305)374-7580

Phone Fax Number

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**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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Foreign Limited Liability Company SUNSHINE STATE MANAGER III, LLC

Certificate of Status Certified Copy 1 05 Page Count \$160.00 Estimated Charge

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Help

https://efile.sunbiz.org/scripts/efilcovr.exe

1/28/2011

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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 LUBILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Ш	MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
1.	Sunshine State Manager III, LLC	
•	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(li	f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of	the written
C	usent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Li ompany," "L.L.C," "LLC.")	ability
2.	Delaware (Jurisdiction under the law of which foreign limited liability (PEI number, if applicable)	
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	₹
4.	1/27/11 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease	2
6.		യ പ
U.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
	(See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7.	/ DUU MIAIIII LAKGS DIIVS VVESI	က္ ≧်
		ATIONS
	Miami Lakes, Florida 33016 (Street Address of Principal Office)	
	(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:	
	See Annex "A" attached hereto and incorporated herein by this reference.	
	Ode Affice A attached hereto and incorporated herein by this releision.	
		_
10	Amakadiaa mininganifi anafi in	a • •
fhe	. Attached is an original certificate of existence, no more than 90 days old, duly authoriticated by the official having custody of Fjurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language,	TIECOTOS IN
tra	rstation of the certificate under oath of the translator must be submitted.)	.4
		_
11	. Nature of business or purposes to be conducted or promoted in Florida: Any and all business	<u>-</u>
	or purposes permitted to be conducted or promoted under the laws of the State of Flori	da.
	Metro 1.	 *
	- Carlot	
	Signature of a member of 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.)	
	Christy Complo, Authorized Representative	

Typed or printed name of signee

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Annex "A"

Managing Members/Managers

The name and usual business addresses of the managing members or managers are as follows:

- Jay I. Kislak
 7900 Miami Lakes Drive West Miami Lakes, Florida 33016
- 2. Thomas Bartelmo 7900 Miami Lakes Drive West Miami Lakes, Florida 33016
- Stephen Braun
 7900 Miami Lakes Drive West Miami Lakes, Florida 33016

SECRETARY OF SHAFED OF CORPGRATION OF CORPGRATION 28 AM 8: 22

1. The same of the Limited Lightline Company in

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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 unavailable, the alternate to be used in t	the state of Florida is:	Tamahay No. of
2. The name and the Florida street addres	s of the registered agent and office	are:
Christy Complo		
	(Name)	AM 8:
7900 Miami Lakes Drive West Florida Street Address (P.O. Box NOT ACCEPTABLE)		
Miami Lakes	FI. 33016	

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 standes 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 Certifled Copy (optional)

5.00 Certificate of Status (optional)

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SUNSHINE STATE MANAGER III, 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 TWENTY-EIGHTH DAY OF JANUARY, A.D.

2011.

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

4932863 8300

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You may varify this certificate online at corb. delaware.gov/authwar.shtml

Jeffrey W. Bullock. Secretary of State

DATE: 01-28-11