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EXAMINER



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DEPAR CHENT OF STATE DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

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CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173

FILING COVER SHEET ACCT. #FCA-14

CONTACT:

Examiner's Initials

Kim Weidenbach

DATE:

08/26/11

REF. #:

000409.153395

CORP. NAME: PENINSULA PROPERTY HOLDINGS IX, LLC

() ARTICLES OF INCORPORATION () ARTICLES OF AMENDMENT

() ANNUAL REPORT	() TRADEMARK/SERVICE	E MARK () FICTITIOUS	NAME
(XX) FOREIGN QUALIFICATION	() LIMITED PART	TNERSHIP () LIM	ITED LIABILITY
() REINSTATEMENT	() MERGER	() WITHDRAW	'AL
() CERTIFICATE OF CANCELLATION	ON		
() OTHER:			
STATE FEES PREPAID V			<u>55.00</u>
	C	OST LIMIT: \$	
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(XX) CERTIFIED COPY	() CERTIFICATE OF GO	OOD STANDING	() PLAIN STAMPED COPY
() CERTIFICATE OF STATUS		•	

() ARTICLES OF DISSOLUTION

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 FO LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. PENINSULA PROPERTY HOLDIN (Name of Foreign Limited Liability Company; must in	NGS IX, LLC
(Name of Foreign Limited Liability Company; must in	nclude "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purconsent of the managers or managing members adopting the Company," "L.L.C.", "LLC.")	rpose of transacting business in Florida and attach a copy of the written alternate name. The alternate name must include "Limited Liability
_{2.} Delaware	3. Applied For
(Jurisdiction under the law of which foreign limited liabilit company is organized)	y (FEI number, if applicable)
_{4.} August <u>24</u> , 2011	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon registration	
(Date first transacted business in (See sections 608.501 & 608.502 l	Florida, if prior to registration.) F.S. to determine penalty liability)
_{7.} 5301 Blue Lagoon Drive, Suite 2	00
Miami, Florida 33126	
(Street Addr	ess of Principal Office)
8. If limited liability company is a manager-manag	ged company, check here 🗹
9. The name and usual business addresses of the m	nanaging members or managers are as follows:
Kent Ellert - 5301 Blue Lagoon Dr.,	Suite 200, Miami, FL 33126
Jim Baiter - 5301 Blue Lagoon D	or., Suite 200, Miami, FL 33126
[Continued on Attached Exhibit	t A]
	90 days old, duly authenticated by the official having custody of records in copy is not acceptable. If the certificate is in a foreign language, a

ls in 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: Any lawful business permitted by the laws of the State of Florida.

> Signature of a member of an authorized representative of a member. (In accordance with section 608.408(3), P.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.)

Brian Van Slyke

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.

1. The name of the Limited Liability Comp PENINSULA PROPERTY	•	
If unavailable, the alternate to be used in the	e state of Florida is:	
2. The name and the Florida street address	of the registered agent and office are:	
NRAI Services, Inc.	(Name)	
515 East Park Ave	POUCE dress (P.O. Box NOT ACCEPTABLE)	
Tallahassee	FL 32301	

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) Patricia Tadlock, Assistant Secretary

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

5 5.00 Certificate of Status (optional)

Exhibit A to Application for Peninsula Property Holdings IX, LLC

9. – Manager's continued:

Juan Castro – 5301 Blue Lagoon Dr., Suite 200, Miami, FL 33126 Brian Van Slyke – 5301 Blue Lagoon Dr., Suite 200, Miami, FL 33126 Sam Carter – 5301 Blue Lagoon Dr., Suite 200, Miami, FL 33126 Frank Salomone – 5301 Blue Lagoon Dr., Suite 200, Miami, FL 33126

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "PENINSULA PROPERTY HOLDINGS IX,

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-SIXTH DAY OF

AUGUST, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PENINSULA PROPERTY HOLDINGS IX, LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF AUGUST, A.D. 2011.

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

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110956400

Jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 8994497

DATE: 08-26-11

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