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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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RE	Î≸NOV 2	AERETA LLAHAS	ne email	address for th	his business entity to be enter only one email addre	ORIGINAL CONTROL OF THE PROPERTY OF THE PROPER

## Foreign Limited Liability Company SLV REDTAIL CLUB, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

D. BRUCE

NOV 23 2011

EXAMINER

Email Address:

#### COVER LETTER

SUBJECT		SLV Redtail Club, L.L.C.		
		Name of Limited Liability Company	•	
Existence, and chec		Liability Company for Authorization to Transact Business in above referenced foreign limited liability company to transmitter to the following:		
_		Nate Richman	·	
		Name of Person		
_	1	Rinaldi, Finkelstein & Franklin, LLC		
		Firm/Company	·	
	591 West Putnam Avenue			
_	Address			
		Greenwich, CT 06830	FIL NOV 22 CAFTAR AHASS	
	City/State and Zip Code			
		nrichman@starwood.com	Table 1	
For further informat	ion concerning this matter, p	: (to be used for future annual report notification)	H: 08 STATE STATE ORIDA	
	Nate Richman	at (203)422-7769		
	Name of Person	Area Code & Daytime Telephone Number		
Division of Registratio P.O. Box 6		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed is a che	eck for the following am	ount:		
\$125.00	Filing Fee \$130.00 Fl		g Fee, Certificate & Certifled Copy	

### 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: SLV Redtail Club, L.L.C. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (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.") (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 11/21/11 Perpetual (Dute of Organization) (Duration: Year limited liability company will ceuse to exist or "perpetual") 6. (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 P.S. to determine penalty liability) 6310 Capital Drive Lakewood Ranch, FL 34202 (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: Michael Moser - 6310 Capital Drive, Suite 130, Bradenton, FL 34202 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 outh of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: /s/ Michael Moser

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 penulties of perjury that the facts stated herein are true.)

Michael Moser

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.

	SLV Rodiail Club, L.L.C.			
If unavailable,	the alternate to be used in the state of Florida is:			
		Žo:	<u>ب</u> ــ	
2. The name a	nd the Florida street address of the registered agent and office are:	LAHAS	1 NOV 22	•
	C T Corporation System	338		
	(Name)	of SI	32	
	1200 South Pine Island Road	ORI	1:08	
,	Florida Street Address (P.O. Box NOT ACCEPTABLE)	DA A	Œ.	
	Plantation FL 33324			
	City/State/Zip			
liability compar agent and agree relating to the p obligations of n	med as registered agent and to accept service of process for the above state by at the place designated in this certificate, I hereby accept the appointment to act in this capacity. I further agree to comply with the provisions of all surper and complete performance of my duties, and I am familiar with and a sy position as registered agent as provided for in Chapter 608, Florida Statu Corporation System	t as registere statutes ccept the	ed	
By: Vo	Signature)  Special Assistant Secretary  Signature  Sig			

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)



#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO REREBY CERTIFY "SLV REDTAIL CLOB, L.L.C." 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-SECOND DAY OF NOVEMBER, A.D. 2011.

DATE: 11-22-11