

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| |
| · · |
| |
| |

Office Use Only

G. MCLEOD

APR 11 2012

EXAMINER



700225979457

12 APR 10 PH 4: 20

12 APR 10 AM 9: 42



ACCOUNT NO. : I2000000195 REFERENCE : 163714 AUTHORIZATION : COST LIMIT : ORDER DATE: April 10, 2012 ORDER TIME : 4:01 PM ORDER NO. : 163714-010 CUSTOMER NO: 7558733 FOREIGN FILINGS NAME: AW SOUTHWEST PLAZA, 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: Becky Peirce -- EXT# 2919

EXAMINER:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, PLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1 AW SOUTHWEST PLAZA, LLC | |
|--|--|
| (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LI | LC.') |
| (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a consent of the managers or managing members adopting the alternate name. The alternate name must include "Lim Company," "L.L.C," "LLC.") | |
| 2. DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized) 3. APPLIED FOR (FEI number, if applicable) | |
| 4. APRIL 10, 2012 (Date of Organization) 5. PERPETUAL (Duration: Year limited liability company will exist or "perpetual") | 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. 2801 PGA BOULEVARD, SUITE 220 | 12 APR |
| PALM BEACH GARDENS, FLORIDA 33410 (Street Address of Principal Office) | |
| 8. If limited liability company is a manager-managed company, check here 🗸 | E A A 9 |
| 9. The name and usual business addresses of the managing members or managers are as follows | |
| 2801 PGA BOULEVARD, SUITE 220 | |
| PALM BEACH GARDENS, FL 33410 | |
| 10. Attached is an original cartificate of existence, no more than 90 days old, duty authenticated by the official having cus the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language 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 | |
| INVESTMENT/MANAGEMENT | ······································ |
| 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 document to the Department of State constitutes a third degree felony as provided for in s.817.155, RRIANK WAYMAN. | in a |

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 | e Limited Liability Company is: |
|---|--|
| AW SOUTH | WEST PLAZA, LLC |
| If unavailable, the | alternate to be used in the state of Florida is: |
| 2. The name and the | he Florida street address of the registered agent and office are: |
| BF | RIAN K. WAXMAN |
| . – | (Name) |
| 28 | 01 PGA BOULEVARD, SUITE 220 |
| | Florida Street Address (P.O. Box NOT ACCEPTABLE) |
| P/ | ALM BEACH GARDENS FL 33410 |
| | City/State/Zip |
| liability company at agent and agree to a relating to the prope | as registered agent and to accept service of process for the above stated limited the place designated in this certificate, I hereby accept the appointment as registered act in this capacity. I further agree to comply with the provisions of all statutes and complete performance of my duties, and I am familiar with and accept the sition as registered agent as provided for in Chapter 608, Florida Statutes. (Signature). |
| Pi Laving been named lability company at agent and agree to a relating to the prope | Florida Street Address (P.O. Box NOT ACCEPTABLE) ALM BEACH GARDENS FL 33410 City/State/Zip as registered agent and to accept service of process for the above stated limited the place designated in this certificate, I hereby accept the appointment as registered act in this capacity. I further agree to comply with the provisions of all statutes or and complete performance of my duties, and I am familiar with and accept the sition as registered agent as provided for in Chapter 608, Florida Statutes. |

\$ 25.00 Designation of Registered Agent
 \$ 30.00 Certified Copy (optional)
 \$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AW SOUTHWEST PLAZA, LLC, A DELAWARE -LIMITED LIABILITY COMPANY" 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 TENTH DAY OF APRIL, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AW SOUTHWEST PLAZA, LLC, A DELAWARE LIMITED LIABILITY COMPANY" WAS FORMED ON THE TENTH DAY OF APRIL, A.D. 2012.

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

5137227 8300

120412926

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

DATE: 04-10-12

Jeffrey W. Bullock, Secretary of State AUTHENTACATION: 9492034