# Division actorposition Page of Professa Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

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#### Foreign Limited Liability Company SPA Florida Hold, LLC

Certificate of Status	0
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CT CORPORATION

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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 LIBBILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

SPA Florida Hold, LLC     (Name of Foreign Limited Liability Company; must in	clude "Limited Liability Company," "L.L.C.," or "LLC.")
SPA Florida Hold, LLC	
(If name unavailable, enter alternate name adopted for the pur	pose of transacting business in Florida and attach a copy of the writte diternate name. The alternate name must include "Limited Liability
Delaware  (Jurisdiction under the law of which foreign limited liability company is organized)	3. (FEI number, if applicable)
4. 11/29/2011 (Date of Organization)	5. Purellul (Duralion: Year limited liability company will cease to
6. Upon filing (Date first transacted business in	exist or "perpetual")  Florida, if prior to registration.)
(See sections 608.501 & 608.502 F	.S. to determine penalty liability)
7. 250 Park Avenue South, 3rd Floor	
New York, N.Y. 10003	
	ss of Principal Office)
8. If limited liability company is a manager-manage	ed company, check here
9. The name and usual business addresses of the ma	maging members or managers are as follows:
	·
10. Attached is an original certificate of existence, no more than 90 the jurisdiction under the law of which it is organized. (A photocomanslation of the certificate under each of the translator must be said.)	
11. Nature of business or purposes to be conducted of	or promoted in Florida: Generic Real Estate
Alm	
Signature of a member or an a	uthorized representative of a member.
	scution of this document constitutes an affirmation under the
document to the Department of State constitute	rus. I am aware that any false information submitted in a get a third degree felony as provided for in s.817.155, F.S.)
Authorized S	ilgnatory d name of signee
1) pee or prime	- townson an accordant

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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.

1. The name of	of the Limited Liabili	ity Company is:	
SPA Florida Hol	ld, LLC		
If unavailable, SPA Plorida Hole		sed in the state of Florida is:	
2. The name a	nd the Florida street	address of the registered agent and office are:	
•	C T Corporation System	n	
		(Name)	
	1200 South Pine Island		
	Florida S	Street Address (P.O. Box NOT ACCEPTABLE)	
	Plantation	FL 33324	
		City/State/Zip	

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.

By: CT Cprporation System

Michael Malkowski

Assistant Secretary

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

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SECRETARY OF STATE
TALL AHASSEE, FI ORIDA

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## Delaware

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#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "SPA FLORIDA HOLD, 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 FOURTEENTH DAY OF MAY, A.D. 2012.

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

5072014 8300

120559166

You may verify this certificate online at corp. delaware. Soviouthwer, whimi

AUTHENT CATION: 9570083

.DATE: 05-14-12