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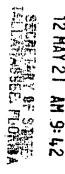
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EXAMINER



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COVER LETTER

TO:	Registration Section 22 Division of Corporations		î, an
	_{CT:} Seaview GP, LLC		
SUBJE		ne of Limited Liability Company	
		pility Company for Authorization to Transact Business in Florida," Cert bove referenced foreign limited liability company to transact business in	
Please re	eturn all correspondence concerning this ma	atter to the following:	
	Terri A. Soucie	·	
		Name of Person	
	Real Capital Solutions, Inc	С.	
		Firm/Company	
	371 Centennial Parkway	y, Suite 200	
,		Address	
	Louisville, Colorado 8002	27	
		City/State and Zip Code	
	tsoucie@realcapitalso	olutions	
	E-mail address: (1	to be used for future annual report notification)	
For furt	her information concerning this matter, plea	ise call:	
	Terri Soucie	at (303) 533-1658	
	Name of Person	Area Code & Daytime Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle	
		Tallahassee, FL 32301	
	ed is a check for the following amou \$125.00 Filing Fee \$\int_\$\$\$ S130.00 Filing Fe Certificate of Star	ce & \$\int\\$155.00 \text{ Filing Fee & \$\int\\$160.00 \text{ Filing Fee, Certificate}	

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 BE SINESS IN THE STATE OF FLORIDA:

(If name unavailable, enter alternate name ac	Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") dopted for the purpose of transacting business in Florida and attach a copy of the v	
consent of the managers or managing memb Company," "L.L.C," "LLC.")	pers adopting the alternate name. The alternate name must include "Limited Liabili	ty
2. Colorado	3. N/A	
(Jurisdiction under the law of which foreign company is organized)	gn limited liability (FEI number, if applicable)	
4. 04/20/12	5. Perpetual	
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")	
6. April 30, 2012		
(Date first trans (See sections 608	sacted business in Florida, if prior to registration.) 3.501 & 608.502 F.S. to determine penalty liability)	
7. 371 Centennial Parkway, S	Suite 200	ويعون
Louisville, CO 80027	イン	- TEMPE
200341110, 00 00021	(Street Address of Principal Office)	,,,,,
8. If limited liability company is a m		TI フ
9. The name and usual business addr	resses of the managing members or managers are as follows:	
Marcel J.C. Arsenault, 371 C	entennial Parkway, Suite 200, Louisville, CO 80027	
Sharon K. Eshima, 371 Ce	entennial Parkway, Suite 200, Louisville, CO 80027	
Terri A. Soucie, 371 Cent	tennial Parkway, Suite 200, Louisville, CO 80027	
	nce, no more than 90 days old, duly authenticated by the official having custody of reco panized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ranslator must be submitted.)	ords in
11. Nature of business or purposes to	be conducted or promoted in Florida: Real Estate Investments	•
Total	- Sancia	
Signature of a	member or an authorized representative of a member.	
(In accordance with section 600	2.409(2) E.S. the assession of this decompant constitutes on affirmation under the	

Typed or printed name of signee

Terri A. Soucie

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.)

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 Company is:

If unavailable, the alternate to be used in the 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 Avenua Florida Street Address (P.O. Box NOT ACCEPTABLE) Tallahassee FL 32301	_
NRAI Services, Inc. (Name) 515 East Park Avenua Florida Street Address (P.O. Box NOT ACCEPTABLE) Tallahassee FL 32301	
(Name) 515 East Park Avenua Florida Street Address (P.O. Box NOT ACCEPTABLE) Tallahassee FL 32301	
515 East Park Avenua Florida Street Address (P.O. Box NOT ACCEPTABLE) Tallahassee FL 32301	
Florida Street Address (P.O. Box NOT ACCEPTABLE) Tallahassee FL 32301	
Tallahassee _{FL} 32301	
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 registagent 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) Michael Mirrione, Asst. Secretary \$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent	terea

\$ 30.00 Certified Copy (optional)

Certificate of Status (optional)

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE

I, Scott Gessler, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

Seaview GP, LLC

is a Limited Liability Company formed or registered on 04/20/2012 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20121224184.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 05/09/2012 that have been posted, and by documents delivered to this office electronically through 05/10/2012 @ 09:40:40.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 05/10/2012 @ 09:40:40 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 8241898.



Secretary of State of the State of Colorado

**********End of Certificate**********

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, http://www.sos.state.co.us/biz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click Business Center and select "Frequently Asked Questions."