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12 JUL 23 AM II: 01

C. LEWIS

JUL 2 4 2012

EXAMINER



ACCOUNT	NO.	:	120000000195

REFERENCE

5**77** 5021613

AUTHORIZATION

COST LIMIT : \$ 125.00

ORDER DATE : July 20, 2012

ORDER TIME : 4:11 PM

ORDER NO. : 283257-005

CUSTOMER NO: 5021613

FOREIGN FILINGS

NAME: 400 SUNNY ISLES LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 2956

EXAMINER:

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:

AND OLIVIAN TO LOUIS OF A CO.
1. 400 SUNNY ISLES LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(Name of Poreign Entined Elability Company, must include Entined Elability Company, 15.15.C., of EEC.)
(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.")
2. Delaware 3.
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. July 19, 2012 5 Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6
(Date first transacted business in Florida, if prior to registration.) (See sections 608,501 & 608,502 F.S. to determine penalty liability)
7. 411 West Putnam Avenue, Greenwich, CT 06830
(Street Address of Principal Office)
(Street Address of Finicipal Office)
8. If limited liability company is a manager-managed company, check here 5. 5.
9. The name and usual business addresses of the managing members or managers are as follows:
c/o Wexford Capital LP 411 West Putnam Avenue, Greenwich CT 06830
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 oath of the translator must be submitted.)
•
11. Nature of business or purposes to be conducted or promoted in Florida: real estate investing
Den
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 in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)
Arthur Amron, Authorized Person

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	/ Compa	ny is:	
400 SUNNY	ISLES LLC			
If unavailabl	e, the alternate to be use	ed in the	state of Florida is:	
2. The name	and the Florida street a	ddress o	f the registered agent and office are:	
	Corporation Service	Compan	·	12 J
			(Name)	
	1201 Hays Street			ASSET SE
	Florida St	reet Addre	ess (P.O. Box NOT ACCEPTABLE)	
	Tallahassee		FL 32301	岩田 い
			City/State/Zip	"
liability comp agent and ag relating to the	oany at the place designa ree to act in this capacity e proper and complete pe	ited in thi). I furth erforman ed agent d	2	ointment as registered us of all statutes th and accept the ida Statutes.
	\$	100.00	Filing Fee for Application	
	\$	25.00	Designation of Registered Agent	
	\$ \$	30.00 5.00	Certified Copy (optional) Certificate of Status (optional)	
	ф	2100	Certificate of Practice (obstollar)	

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "400 SUNNY ISLES 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 TWENTIETH DAY OF JULY, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "400 SUNNY ISLES LLC" WAS FORMED ON THE NINETEENTH DAY OF JULY, A.D. 2012.

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

5186123 8300

120856008

Jeffrey W Bullock, Secretary of State

AUTHENTY CATION: 9723595

DATE: 07-20-12

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