# #11/300000/4/8

(Re	questor's Name)	
, (Ad	dress)	
(Ad	dress)	
(0)	(O)   F	10
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
		·

Office Use Only



800244488078

03/05/13--01012--017 \*\*1368.75

13 MAR -5 PH 1:41

13 MAR -5 AMID: 04

K.SALY EXAMINER MAR 6 - 2013

CORPDIRECT AGE 515 EAST PARK AV TALLAHÄSSEE, FL 222-1173	ENUE	merly CCRS)	
FILING COVER S ACCT. #FCA-14	SHEET		
CONTACT:	KATIE WO	NSCH	
DATE:	03/05/2013		
REF. #:	001495.1819	<u>62</u>	
CORP. NAME:	<u>TAMIAMI</u>	NORTH LLC	
( ) ARTICLES OF INCO ( ) ANNUAL REPORT ( XX ) FOREIGN QUAL ( ) REINSTATEMENT ( ) CERTIFICATE OF C ( ) OTHER:	IFICATION	( ) ARTICLES OF AMENDMENT ( ) TRADEMARK/SERVICE MARK ( ) LIMITED PARTNERSHIP ( ) MERGER	
		TH CHECK# 10 3760 CCOUNT IF TO BE DEBITE	
		COST LI	MIT: \$
PLEASE RETU	RN:		
( ) CERTIFIED COPY		ERTIFICATE OF GOOD STANDING	( XX ) PLAIN STAMPED COPY

Examiner's Initials

### 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 INVITED LIABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

IMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
Tamiami North LLC
(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 writte 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  (Jurisdiction under the law of which foreign limited liability  3. 26-1572740  (FEI number, if applicable)
company is organized)
4 12/14/2007 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6 December 27, 2007
(Control beautiful for the Control of Prince to Registration )
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 3309 Fairmont Drive
Nachadle TN 27202
Nashville, TN 37203  (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:
GRACE, OLIVER R. JR.
3309 Fairmont Drive
3309 Failmont Drive
Nashville, TN 37203
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records i
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 T
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.)  Thomas L. Selfert, Authorized Representative
Typed or printed name of signee
ryped or printed fixing or signed

#### 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:
Tamiami North LLC
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:
United Corporate Services, Inc.
(Name)
9200 South Dadeland Blvd., Suite 508
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Miami, <sub>FL</sub> 33156
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.

Michael A. Barr, President

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

## Delaware

PAGE 1

#### The First State

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

DELAWARE, DO HEREBY CERTIFY "TAMIAMI NORTH 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 FOURTH DAY OF MARCH, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TAMIAMI NORTH LLC" WAS FORMED ON THE FOURTEENTH DAY OF DECEMBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4474023 8300

130273422

AUTHENTICATION: 0256997

DATE: 03-04-13

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