M 13 UUU 2833

(Re	equestor's Name)			
(Ac	idress)			
(Ac	ddress)			
(Ci	ty/State/Zip/Phon	e #)		
PICK-UP	MAIT	MAIL		
(Bo	usiness Entity Na	me)		
(Document Number)				
Certified Copies	` Certificate:	s of Status		
Special Instructions to Filing Officer:				

Office Use Only

MAY 6 2013 B KOHR



600247533496

DECENTED 13 MAY -3 PH 1: 42





ACCOUNT NO. : 12000000195

REFERENCE : 635427 134758A

AUTHORIZATION :

COST LIMIT :

ORDER DATE: May 3, 2013

ORDER TIME : 11:50 AM

ORDER NO. : 635427-005

CUSTOMER NO: 134758A

FOREIGN FILINGS

NAME: ADAR JUPITER, 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# 52956

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 BUISINESS IN THE STATE OF FUORIDA-

	f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written					
	onsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C," "LLC.")					
2.	Delaware 3. 90-0918002					
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)					
4.	November 7, 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.	7. 2875 N.E. 191 Street, Suite 700, Aventura, Florida 33180					
	(Street Address of Principal Office)					
8.	(Street Address of Principal Office) 3. If limited liability company is a manager-managed company, check here					
9.	9. The name and usual business addresses of the managing members or managers are as follows:					
	Managing Member is ADAR Management, LLC					
	Business Address: 2875 N.E. 191 Street, Suite 700, Aventura, Florida 33180					
thej	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a lation of the certificate under oath of the translator must be submitted.)					
11.	Nature of business or purposes to be conducted or promoted in Florida:					
<u> </u>	real estate investment					
	Simplifies of a member of an outhorized 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.)

ABALSKY

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.

	the Limited Liability Company is piter, LLC	:		
If unavailable, th	ne alternate to be used in the state	of Florida is:		
2. The name and	I the Florida street address of the	registered agent and office are:		
	Ted Klein			
_	(N	ame)	-	
8030 Peters Road, Suite D-104				
Florida Street Address (P.O. Box NOT ACCEPTABLE)				
<u> </u>	Plantation	_{FL} 33324	_	
	Cit	y/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.

(Signature)

\$ 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 "ADAR JUPITER, 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 THIRD DAY OF MAY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ADAR JUPITER, LLC" WAS FORMED ON THE SEVENTH DAY OF NOVEMBER, A.D. 2012.

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

5238196 8300

130521976

Jeffrey W Bullock, Secretary of State
AUTHENTYCATION: 0404744

DATE: 05-03-13

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