Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H130001205153)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

From:

: J L HOFMANN & ASSOCIATES, P.A. Account Name

Account Number: I19990000022 Phone

: (305)666-0024

Fax Number

; (305) 666-0028

**Enter the email address for this business entity to be used for futu annual report mailings. Enter only one email address please. **

Email Address:

Foreign Limited Liability Company Martin Downs GP LLC

Certificate of Status	0
Certified Copy	0
Page Count	Oul:
Estimated Charge	\$125.00

Electronic Filing Monu

Corporate Filing Menu

Help

JUN - 3 2013

J. BRYAN 5/31/2013

https://efile.sunbiz.org/scripts/efilcovr.exe

H130001.5001.5

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WILH SECTION 608,503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HARILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Martin Downs GP LLC (Name of Forcien Limited Liability Company; pro	st include "Limited Liability Company," "L.L.C.," or "LLC.")
(
(If name unavailable, enter alternate name adopted for the consent of the managers or managing members adopting Company," "L.L.C.," "L.L.C.")	e purpose of transacting business in Florida and attach a copy of the written the alternate name must include "Limited Liability
₂ Delaware	_{3.} 46-2688218
(Jurisdiction under the law of which foreign limited list company is organized)	bility (FEI number, if applicable)
4. April 29, 2013	_{5.} perpetual
(Dute of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6.	Fig. 5 m
(Date first transacted busine	ss in Florids, if prior to registration.) 502 F.S. to determine penalty liability)
7. 8475 SW 206 Terrace	3
Cutler Bay, FL 33189	是
	Address of Principal Office)
·	5 5
8. If limited liability company is a manager-ma	naged company, check here
9. The name and usual business addresses of the	ne managing members or managers are as follows:
Milton Robinson	
8475 SW 206 Terrace	
Cutler Bay, FL 33189	
	e than 90 days old, duly authenticated by the official having custody of records in photocopy is not acceptable. If the certificate is in a foreign language, a st be submitted.)
11. Nature of business or purposes to be condu	icted or promoted in Florida:
real estate investment	<u></u>
Ant	ms
Signature of a member of	or an authorized representative of a member.
	, the execution of this document constitutes an affirmation under the
	cin are true. I am aware that any false information submitted in a pastitutes a third degree felony as provided for in s.817.155, F.S.)
Milton Robinson	· · · · · · · · · · · · · · · · · ·
Typed or	printed name of signee

4130001205153

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

Martin Downs GP 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:



(Name)

8275 SW 206 Terrace

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Cutler Bay

,, 33189

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.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

H130001206153

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "MARTIN DOWNS GP, 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. 2013.

5328387 8300

130576746

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

AUTHENTICATION: 0432202

DATE: 05-14-13

H130001205153