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(Requestor's Name) (Address) (Address)	800251110248	
(City/State/Zip/Phone #)		
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Special Instructions to Filing Officer:	FILED 13 SEP 10 AN 9:43 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Office Use Only .	≥™ చ్ SEP 1 1 2013	

L

T. HAMPTON

CORPORATION SERVICE COMPAN	ι <b>λ.</b>	10 <b>59</b> "	<b>97</b>	
	ACCOUNT NO.	: 12000000	0195	
	REFERENCE	: 793694	7833946	
	AUTHORIZATION	Sprettille	man	
	COST LIMIT	: (/\$\130.00		
ORDER DATE :	September 9, 201	.3		
ORDER TIME :	4:44 PM			
ORDER NO. :	793694-005			
CUSTOMER NO:	7833946			
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#### FOREIGN FILINGS

NAME: 100 SP OWNER, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

.

- CERTIFIED COPY

   XX
   PLAIN STAMPED COPY

   XX
   CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER:

CR2E027 (9/10)

### COVER LETTER

TO: Registration Section Division of Corporations

# SUBJECT: 100 SP Owner, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Camilo Miguel,	Jr.
	Name of Person
100 SP Owner,	LLC
-	Firm/Company
1691 Michigan A	Avenue, Suite 215
	Address
Miami Beach, Fl	L 33139
	City/State and Zip Code
CMigueljr@yaho	o.com
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter, please	e call:
Carol Nazarkewich	<sub>هد</sub> 305 531-2426
Name of Person	Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations	STREET ADDRESS: Division of Corporations
Registration Section P.O. Box 6327	Registration Section
Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amoun	ot:

Enclosed is a check for the following amount:

Certificate of Status

Certified Copy

□ \$160.00 Filing Fee, Certificate of Status & Certified Copy

### 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:

## L 100 SP Owner, 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 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	90-1011809		
	(Jurisdiction under the law of which foreign limited liability company is organized)	2.	(FEI number, if applicable)		
4.	8/2/13 (Date of Organization)	5.	perpetual (Duration: Year limited liability company will cease exist or "perpetual")	to	
6.					
	(Date first transacted business in F (See sections 608.501 & 608.502 F.	lori S. te	da, if prior to registration.) o determine penalty liability)		
7.	1691 Michigan Avenue, Suite 215		<u> </u>		
	Miami Beach, FL 33139			S S	
	(Street Addres	s of	Principal Office)	- <del>-</del>	
	If limited liability company is a manager-manager		· · · · · · · · · · · · · · · · · · ·	10 /	Ē
9.	The name and usual business addresses of the ma	nag	ing members or managers are as follows	ë WV	D
	MC Manager, LLC			£Ĵ	
	1691 Michigan Avenue, Suite 215				
	Miami Beach, FL 33139				

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: Engage in any business activity for which a limited liability company may be organized in the State of Delaware

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.)

Camilo Miguel, Jr., Authorized Representative

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 Company is:

100 SP Owner, 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:

Corporation Service Company

1201 Hays Street

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

(Name)

Tallahassee <sub>FL</sub>

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 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.

Carina L. Du S 100.00 **Filing Fee for Application** Designation of Registered Agent 5 25.00 S 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "100 SP OWNER, 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 FIFTH DAY OF SEPTEMBER, A.D. 2013.



5377628 8300

131042308 You may varify this certificate online at corp.delaware.gov/authver.shtml

Jeffrey W. Bullock, Secretary of State AUTHENTICATION: 0712095

DATE: 09-05-13