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UN SENVICE CUMPANT
ACCOUNT NO. : 12000000195
REFERENCE : 813533 4301924
AUTHORIZATION: Spellellenan
COST LIMIT : \$ 155.00
ORDER DATE : September 18, 2013
ORDER TIME : 9:22 AM
ORDER NO. : 813533-005
CUSTOMER NO: 4301924
FOREIGN FILINGS
NAME: SRA/WESTON SHOPS, LLC
XXXX QUALIFICATION (TYPE: <u>LL</u>)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX 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 BUSINESS IN THE STATE OF FLORIDA:

1. SRA/Weston Shops, 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 consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Company," "L.L.C," "LLC.")	
Delaware 3.	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
September 17, 2013 September 17, 2013 September 17, 2013	
(Date of Organization) (Duration: Year limited liability company will cea exist or "perpetual")	se to
_{5.} Upon filing	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
_{7.} c/o Savitar Realty Advisors	SECR ALL/
5345 Pine Tree Dr., Miami Beach, FL 33140	
(Street Address of Principal Office)	<u> </u>
8. If limited liability company is a manager-managed company, check here	FLOR FLOR
9. The name and usual business addresses of the managing members or managers are as follows:	DE P
Savitar Realty Advisors	
5345 Pine Tree Dr., Miami Beach, FL 33140	•••
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custor the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign langu- 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 hold	ling
Signature of a member or an authorized representative of a member.	 •
Signature of a member or air 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.	

Typed or printed name of signee

Aaron S. Gaynor

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: ston Shops, LLC			
If unavailable,	the alternate to be used in the state of Florida is:			
2. The name ar	nd the Florida street address of the registered agent and office are:	TAL.	2813	
	Corporation Service Company	至著	SEP T	П
	(Name)	TSST TSST	19	=
	1201 Hays Street	mq TO	≥ (וו
•	Florida Street Address (P.O. Box NOT ACCEPTABLE)		5	
	Tallahassee _{FL} 32301	5 <u>~</u>	100	
	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.

Sue G. Knight
(Signature)

Assistant Vice 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

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The First State

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

DELAWARE, DO HEREBY CERTIFY "SRA/WESTON SHOPS, 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 EIGHTEENTH DAY OF SEPTEMBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SRA/WESTON SHOPS, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF SEPTEMBER, A.D. 2013.

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

5400602 8300

131103876

Jeffrey W Bullock, Secretary of Sta AUTHENTYCATION: 0746972

DATE: 09-18-13

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