Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number ; (850) 617-6383

From:

Account Name : DAVID E HIGHTOWER

Account Number : I20060000090

: (850)549-3812

Phone

Fax Number

: (850)607-2663

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

Email Address: davida bauside.cc

Foreign Limited Liability Company PB Owner, LLC

| Certificate of Status | 1 |
|-----------------------|----------|
| Certified Copy | 0 |
| Page Count | 06 |
| Estimated Charge | \$130.00 |

Nov. 13. 2013 3:45PM

No. 0065 P. 2

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CR2E027 (9/10)

COVER LETTER

TO:

Registration Section
Division of Corporations

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PB 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:

Bret M. Kanis

Name of Person

Hightower Law Firm

Firm/Company

119 North Palafox Street

Address

Pensacola, Florida 32502

City/State and Zip Code

david@bayside.cc

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bret M. Kanis

850

549-3812

Name of Person

Area Code & Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS:

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, PL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fcc

\$130.00 Filing Fee & Certificate of Status

☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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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:

| LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. PB 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 (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable) | | | | |
| 4. 11/7/2013 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpenual") | | | | |
| 6(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) | | | | |
| 7. 10480 Tower Ridge Road | | | | |
| Pensacola, Florida 32526 문화 중 | | | | |
| (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: | | | | |
| PB Mezz, LLC | | | | |
| Post Office Box 940 | | | | |
| Gulf Breeze, Florida 32562 | | | | |
| 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: See "Exhibit A" attached hereto | | | | |
| 1611- | | | | |
| 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.) | | | | |
| Bret M. Kanis, Authorized Representative | | | | |

Typed or printed name of signee

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EXHIBIT A

The sole purpose to be conducted or promoted by the Company has been since its formation and shall continue to be to engage in the following activities:

- (a) to acquire, own, hold, maintain, operate and dispose of the SpringHill Suites by Marriott, located at 24 Via De Luna Drive, Pensacola, Florida 32561 (the "Property");
- (b) to sell, transfer, service, convey, dispose of, pledge, assign, borrow money against, finance, refinance or otherwise deal with the Property to the extent permitted under the loan documents evidencing, securing or delivered to Ladder Capital Finance LLC (the "Lender") in connection with the Company's loan from the Lender secured by the Property (the "Loan Documents") and
- (c) to engage in any lawful act or activity and to exercise any powers permitted to limited liability companies organized under the laws of the State of Delaware that are related or incidental to and necessary, convenient or advisable for the accomplishment of the above-mentioned purposes.

Additionally, the Company may execute and deliver the Loan Documents and perform its obligations thereunder.



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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 Com | apany is: | |
|---|---|------------|
| If unavailable, the alternate to be used in the | he state of Florida is: | |
| 2. The name and the Florida street address | s of the registered agent and office are: | 2013 TAL |
| Hightower Lav | w Firm | 1000円 |
| | (Name) | See on I |
| 119 North Pal | afox Street | E F1 (S) |
| Florida Street A | ddress (P.O. Box NOT ACCEPTABLE) | 語 2 |
| Pensacola | _{FL} 32502 | P |
| | 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.

Fol. The Fier (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 "PB 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 EIGHTH DAY OF NOVEMBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PB OWNER, LLC" WAS FORMED ON THE SEVENTH DAY OF NOVEMBER, A.D. 2013.

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

5429128 8300

131284000

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

Jeffrey W. Bullock, Secretary of State

AUTHENTY CATION: 0879512

DATE: 11-08-13