Florida Department of State

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Foreign Limited Liability Company T Baldwin Center, LLC

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B. BOSTICK

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EXAMINER

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COVER LETTER

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	dstration Section Ision of Corporations	;			
SUBJECT:	T BALDWIN CEN	ter fl, llc			
BUISING I.		Name of Lin	nited Liability Company	<u> </u>	
				unsact Business in Florida," Co y company to transact business	
Please return	all correspondence o	concerning this matter to the	following:		
	Marshall Lionti				
		N	ame of Person		
	T Baldwin Cent	er FL, LLC			
		Fi	mn/Company		
	16600 Dallas Pk	cwy Ste 300			
			Address		
	Dallas, TX 752	48			
		City/S	tate and Zip Code		
	mlionti@tabanig	roup.com			
		E-mail address: (to be use	for future annual report noti	fication)	
For further in	nformation concernin	g this matter, please call:		a Number	5-3 6-3 6-3
				一. 万:	60 75
			at ()		
	Name	of Person Are	a Code & Daytime Telephone	121	- 9
	ILING ADDRESS:		ET ADDRESS:		
Division of Corporations Division of Corporations					
Registration Section Registration Section		, - ' '			
P.O. Box 6327 Clifton Build			9.7	Ġΰ	
Tal!	ahassee, FL 32314		ixecutive Center Circle sssee, FL 32301	(1) (2) (3) (4) (4) (4)	+
Enclosed i	s a check for the f	following amount:			
	125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Certification of Status & Certification Con	

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SURMITTED TO REGISTER A FOREIGN

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE S	STATE OF FLORIDA:
(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 consent of the managers or managing members adopting the alternate Company," "LLC," "LLC.")	of transacting business in Florida and attach a copy of the written ate name. The alternate name must include "Limited Liability
2. TEXAS 3.	46-4091936
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. 11/14/2013 5.	Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6.	
(Date first transacted business in Flori (See sections 608.501 & 608.502 F.S. to	as, it prior to registration.) o determine penalty liability)
7. 16600 Dallas Pkwy Ste 300	
Dailas, TX 75248	
(Street Address of	Principal Office)
8. If limited liability company is a manager-managed co	Principal Office) Description of the principal Office Description of the principal Office
9. The name and usual business addresses of the manag	ing members or managers are as follows:
GP T Lake Baldwin Center FL, Inc.	直升 翻
16600 Dallas Pkwy, Sie 300	9
Dallss, TX 75248	
 Attached is an original certificate of existence, no more than 90 de the jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under oath of the translator must be submit 11. Nature of business or purposes to be conducted or p 	is not acceptable. If the certificate is in a foreign language, a lited.)
Leasing owned commercial real estate	
Signature of a premoer or an auth	ofized representative of a member.
(In accordance with section \$08.408(3), F.S., the executi	on of this document constitutes an affirmation under the 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.)
Zaffer S Taboni, as sole shareholder of	GPT Lake Baldwin Center FL, Inc.

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.

I. The name of	of the Limited Lis	ability Compa	uny is:	
If unavailable,	, the alternate to b	e used in the	state of Florida is:	
2. The name a	and the Florida st	reet address o	f the registered agent and office	are:
		ст	Corporation System	
	(Name)			7AL 261
	1200 South Pine Island Road		2613 NUY	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		سبب	
	Plantation		FI. 33324	
	City/State/Zip			
liability compa registered age statutes relatin	my at the place de nt and agree to ac ig to the proper at	esignated in ti at in this capa and complete p	o accept service of process for the ats certificate, I hereby accept the city. I further agree to comply wit erformance of my duties, and I an tered agent as provided for in Cha	appointment as th the provisions of all n familiar with and
	С	T Corporation	System	
	By:	(Signa	hura)	
		(ឯរម្យាជ	hure) M. E. Jones, Asst. Se	∌c'y.
		\$ 100.00	Filing Fee for Application	
		\$ 25.00 \$ 30.00	Designation of Registered Age Certified Copy (optional)	nt
		\$ 5.00	Certificate of Status (optional))

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



John Steen Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that on November 14, 2013, T Baldwin Center, LLC, a Domestic Limited Liability Company (LLC) (file number 801880000), changed its name to T Baldwin Center FL, LLC.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on November 18, 2013.





John Steen Secretary of State

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Fax: (512) 463-5709 TID: 10267 Dial: 7-1-1 for Relay Services Document: 515605000006

Phone: (\$12) 463-5555 Prepared by: \$Q\$-WEB