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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:	Division of Corporations Fax Number : (850)617-6383		127 胡	
From:	Account Name : TRIAD PROFESSIONAL SERVICES, Account Number : 120020000094	LIC	φ 3	

: (770)777-2091 Fax Number

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

Email Address:

Foreign Limited Liability Company LOOP WEST (ORLANDO), LLC

Certificate of Status Certified Copy 1 05 Page Count Estimated Charge \$155.00

T. Burch DEC. 2 2013.

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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: LOOP WEST (ORLANDO), LLC

Name of Limited Liability Compan

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:

Sharon K. Gray

Name of Person

Triad Professional Services, LLC

Firm/Company

1720 Windward Concourse, Ste. 390

Address

Alpharetta, GA 30005

City/State and Zip Code

jbaden@triadpros.com

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

For further information concerning this matter, please call:

Sharon K. Grav

770

777-2091

Name of Person

Area Code & Daytime Telephone Numbe

MAILING ADDRESS:

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

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle

Taliahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125,00 Filing Fee

\$130.00 Filing Fee & Cortificate of Status

\$155.00 Filing Fee & 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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN 1. LOOP WEST (ORLANDO), LLC					
(Name of Foreign Limited Liability Company; must i	includ	e "Limited Liability Compan	y," "L.L.C.," or "L	LC.")	
(If name unavailable, enter alternate name adopted for the pu consent of the managers or managing members adopting the Company," "L.L.C," "LLC.")	шроse alten	of transacting business in Flatenate name. The alternate name	orida and attach a c must include "Lin	opy of the	he written bility
2. Delaware	3.	Applied For		_	
(Jurisdiction under the law of which foreign limited liabili company is organized)	ity	(FEI number,	if applicable).	ထ	
4 11/25/2013	5.	Perpetual		SO	ш
(Date of Organization)		(Duration: Year limited linexist or "perpetual")	Tree and	coase t	<u></u>
6. Upon qualification		• • •	100 / 100 /	=	
(Date first transacted business is (See sections 608.501 & 608.502	F.S.	ida, if prior to registration.) o determine penalty liability)	G2 7.	φ	
7, 400 Clematis Street, Suite 201			DA FI	$\bar{\omega}$	
West Palm Beach, FL 33401					
·	rc88 O	f Principal Office)			******
8. If limited liability company is a manager-manager	ged o	ompany, check here 🏢			
9. The name and usual business addresses of the n	-	ting magnificate of manager	ere are as follow	e.	
		_			14
John W.S. Preston (Director) - 400 Clemet	113 5	reet, Ste. 201, West r	OILLI DOCCII, FL		/ 1
Robert S. Green (Director) - 2851 John	Stre	et, Ste. One, Markha	ım, Ontario L	3R 5R	:7
(SEE ATTACHED ADDITIONAL I	LIS	TINGS)			
10. Attached is an original contificate of existence, no more than	n 90 d	avs old, doly authenticated by	the official having o	ustadva	— frecords in
the jurisdiction under the law of which it is organized. (A phot	ocopy	is not acceptable. If the certifi			
translation of the certificate under outh of the translator must be		Ď	eal estate ow	nerehi	in
11. Nature of business or purposes to be conducted	d or 1	promoted in Florida:	Sai OSIBIC ON	7	<u>-</u>
(a REIT company)		**************************************			 '
Jer 111	•••				
Signature of a mornber or an (In accordance with section 608,408(3), F.S., the				the	
penalties of perjury that the facts stated herein an document to the Department of State constit	e truc.	I am aware that any false info	ormation submitted	in s	
Robert S. Green	uics B	ama addice reions us bidaid	ee for Hi bigs (*173	g distribuji	

Typed or printed name of signee

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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.

	ATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE ATE OF FLORIDA.
1.	The name of the Limited Liability Company is:
1.6	OOP WEST (OR) ANDOUT LC

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:		1	<u></u> =		
	NRAI Services, I	Inc.	5554E	NOV 2	
		(Name)	TH CA	~	ां
	1200 South Pine	s Island Road	FLOR	AH 89	
Florida Street Addr		ess (P,O, Box NOT ACCEPTABLE)	N A	<u></u>	
	Plantation	_{FL} 33324			
		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)

ATTACHMENT TO

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY

TO TRANSACT BUSINESS IN FLORIDA

OF

LOOP WEST (ORLANDO), LLC

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RELIGITARY OF STATE
TALLAHASSEE, FLORIDA

9. The name and usual business addresses of the managing members or managers are as follows (additional listings):

Jeffrey W. Preston (Director) - 5050 North Ocean Drive, Unit 1103, Singer Island, FL 33404

Michael J. Delmar (Director) – c/o PSP Invastments, 1250 Boul. Rene-Levesque West, Suite 900, Montreal, Quebec H3B 4W8.

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "LOOP WEST (ORLANDO), 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 TWENTY-SEVENTH DAY OF NOVEMBER, A.D.
2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LOOP WEST (ORLANDO), LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF NOVEMBER, A.D. 2013.

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

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

AUTHENTICATION: 0932715

DATE: 11-27-13

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