# MUDOODOHAG

(Requestor's Name)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	<del></del>
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

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2014 JAN 24 AM 9: 19

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J. MINGO



ACCOUNT NO. : 12000000195

	REFERENCE	:	970643	4304512	
	AUTHORIZATION	ケン			
	COST LIMET		2 \$ C1251200	<u> </u>	
ORDER DATE :	January 22, 2014				
ORDER TIME :	9:33 AM				
ORDER NO. :	970643-025				
CUSTOMER NO:	4304512				
FOREIGN FILINGS					

NAME: BEAULY, LLC

XXXX QUALIFICATION (TYPE: LL)	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILIN	
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING	JAN 24 AM
CONTACT PERSON: Susie Knight EXT# 52956	FSTATES
EXAMINER:	

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

IN COMPLIANCE WITH SECTION 605.0902, 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:	
l. Beaul	ly, LLC	
	dame of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
	unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy o	
	f the managers or managing members adopting the alternate name. The alternate name must include "Limited I." "L.L.C," "LIC.")	Liability
<sub>2</sub> Delaw		
(Jurisdi	iction under the law of which foreign limited liability (FEI number, if applicable)	
compa	any is organized)	
4		
•	(Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability)	
5. <u>1999</u>	Harrison Street, 24th Floor, Oakland, CA 94612	
		···· (
	(Street Address of Principal Office)	
<sub>5.</sub> P.O. B	3ox 1226, Oakland, CA 94604-1226	22
		表記
	(Mailing Address)	<del>*                                    </del>
7. The r	name, title or capacity and address of the person(s) who has/have authority to manage is/are:	52
Andrew .	J. Sossen, President of Starwood Waypoint Borrower, LLC, the Sole Member of Beauly, LLC	관점 공급
1999 Hai	rrison Street, 24th Floor, Oakland, CA 94612	
<del></del>		
	ed is an original certificate of existence, no more than 90 days old, duty authenticated by the official having custody	
	diction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign langu	iage, a
ranslation (	of the certificate under oath of the translator, must be submitted.)	
	(Mel)	
	Signature of an authorized person	
	(In accordance with section 605.0203, 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.;	1
	Andrew J. Sossen	•
	Typed or printed name of signee	

#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

E WELL STEEL S

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (I)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

\$ 100.00

\$ 25.00 \$ 30.00

1. The name	of the Limited Liability Co	ompany is:			
Beauly, LLC					
If unavaitable	e, the alternate to be used in	the state of Florida is:			
2. The name	and the Florida street addr	ess of the registered agent and office are	e:		
	Corporation Service Com	ралу			
	**************************************	(Name)			
	1201 Hays Street				
	Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	Tallahassee	FL 32301 Clty/State/Zip		4 JAN 2	
liability compo registered age statutes relativ	any at the place designated int and agree to act in this c ng to the proper and compl	nd to accept service of process for the a in this certificate, I hereby accept the apacity. I further agree to comply with the performance of my duties, and I am fegistered agent as provided for in Chapt	opointment as 500 the provisions of all 1500 miliar with and 5000 miliar with an observance with a supervision with	24 AM 9: 19	
	By: Marie	ignature) ASST MAR	.Sec iAlon		

Filing Fee for Application Designation of Registered Agent

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 "BEAULY, 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-SECOND DAY OF JANUARY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BEAULY, LLC" WAS FORMED ON THE FIFTEENTH DAY OF JANUARY, A.D. 2014.

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

2014 JAN 24 AM 9: 19
SECRETARY OF STAFE
SALE SHASSEF FIREINA

5466432 8300

140072647

AUTHENTY CATION: 1074147

DATE: 01-22-14

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