Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number

: (850)878-5368

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### Foreign Limited Liability Company Waterton Northbridge Manager, L.L.C.

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Certificate of Status	0
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Corporate Filing Menu

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#### COVER LETTER

TO: Registration Section Division of Corpor				•	
SUBJECT, Waterton North	bridge Manager, L.L.C.			_	
	Name of Lim	Ited Liability Company		•	
	Foreign Limited Liability Co nitted to register the above ref				
Please return all corresponder	nce concerning this matter to the	ts following:	•		
Michello J.	Bayer			-+ <u>1</u>	~1
,		Name of Person	<del></del>		2014 MAR
Winter A				<b>□</b> (*) <b>&gt;</b> (*)	
Waterton A		Pirm/Company		HAS.	5
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30 S. Wack	er Dr., Ste. 3600			ini ⊸i mi	
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Chicago, IL				STATE LORID,	
	Cityi	State and Zip Code		∑ <b>&gt;</b> , √,	-1
mbayer@ws	lic.com				
<del></del>	E-mail address: (to be us	ed for future assumi report notifi	oation)		
For further information conce	ming this matter, please call:				
Michelle J. Bayer		at (312 ) 476-20	004		
Na	ns of Contact Person	Area Code Da	ytimo Telephone Number		
MAILING ADDRE Division of Corporati Registration Section P.O. Box 6327 Tallahassee, FL 3231	ons Divisi Rogist Clifter 4 266) I	ET ADDRESS: on of Corporations ration Section a Building Executive Center Circle assec, FL 32301			
Enclosed is a check for the D \$125.00 Filing Fee		☐ \$155.00 Filing Pec & Certified Copy	ロ \$160.00 Filing Fee, Co of Status & Certified C		

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

IN COMPLIANCE WITH SECTION 603.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

		<del></del>
(If tame unavailable, enter alternate name adopted for the Liability Company," "L.L.C," or "LLC.")	the purpose of manuscring business in Florids. The alternate name must include	"Limited
2. DELAWARE	3	
(Jurisdiction under the law of which foreign limited is company is organized)	liability (FBI number, if applicable)	
4 Date first transac	cted business in Florids, if prior to registration.) 204 & 605.0905, F.S. to determine penalty liability)	
(See scalings 605.09	904 & 605.0905, F.S. to determine penalty liability)	
5. 30 S. Wacker Dr., Ste. 3600, Chicago, IL 606	606	
	(Street Address of Principal Office)	
		ALL ALLES
6. 30 S. Wacker Dr., Ste. 3600, Chicago, IL 6060	<u>06</u>	
• •	5	
	(Mailing Address)	3
7. The same title or conscituted address.	is of the person(s) who has/have authority to manage is/are:	1
7. The mine, the or capacity and address	S of the philadital with the hart and only to manage as more	, 🛪 🗿
WRPV XII Northbridge Orlando, L.L.C., Member	er, 30 S. Wacker Dr., Sto. 3600, Chicago, IL 60606	A STA
<del>_</del> ·		12 - 14 - 15 - 15 - 15 - 15 - 15 - 15 - 15
<del></del>		<u> </u>
8. Attached is an original certificate of exi-	istence, no more than 90 days old, duly authenticated by the	official
	on under the law of which it is organized. (A photocopy is n	ot
having custody of records in the jurisdiction	a sale of the sale	
having custody of records in the jurisdiction acceptable. If the certificate is in a foreign	language, a translation of the certificate under oath of the tr	anslator
having custody of records in the jurisdiction acceptable. If the certificate is in a foreign	language, a translation of the certificate under oath of the tr	anslator
having custody of records in the jurisdiction acceptable. If the certificate is in a foreign	language, a translation of the certificate under oath of the tr	anslator
having custody of records in the jurisdiction acceptable. If the certificate is in a foreign must be submitted)	language, a translation of the certificate under oath of the tr	anslator
having custody of records in the jurisdiction acceptable. If the certificate is in a foreign must be submitted)  Signature with rection 605 0203 E.S., the scentiles of this	I language, a translation of the certificate under oath of the translation of the certificate under oath of the translature of an authorized person.  Let document constitutes as affirmation under the penalties of perjusy that the facts thated to the Department of State consultates a third degree felony as provided for in a.817.155, F.	herein ave true. 1
having custody of records in the jurisdiction acceptable. If the certificate is in a foreign must be submitted)  Signature with section 615 1923 F.S. the scentists of this	n language, a translation of the certificate under oath of the translation of the certificate under oath of the translature of an authorized person	herein ave true. 1

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(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.

funavallable, ti	he alternate to be used	d in the state of Florida is:	
. The name an	d the Florida street ac	Idress of the registered agent and office are:	2014 7811
	CT Corporation System		2014 MAR Secret
		(Name)	MAR 13
	1200 South Pine Island I	Rozd	
· <del>-</del>	Florida St	roet Address (P.O. Box NOT ACCEPTABLE)	FLO TO
	Plentation	FL 33324	E Sagar
			, .

Haying 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 605, Plorida Statutes.

By: CT Corporation System Bernadette Baker
(Signature) Assistant Secretary

\$ 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

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARB, DO HERBY CERTIFY "WATERTON NORTHBRIDGE MANAGER, L.L.C." 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 THIRTEENTH DAY OF MARCH, A.D. 2014.

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

5497629 8300

140328402

You may worify this cortificate online at corp.delaware.cov/authwor.shtml

Jeffrey W. Bullock, Secretary of State

DATE: 03-13-14