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

Phone : (850)222-1092 Fax Number : (850)878-5368 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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 SLV Castle Oaks, L.L.C.

RECEIVED 4 HAR 14 PH 2: 25 3ECHETARY OF STATE FALLAHÁSSEE, FLORIDA

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\$125.00

Electronic Filing Menu

Corporate Filing Menu

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3/14/2014

COVER LETTER

TO:	Registration Section Division of Corporation	La		
SUBJE	SLV Cartle Caks, L	.L.C.		
		Name of Limited Liability Company		
		elgn Limited Liability Company for Authorization to Transact Business in Florida," Certificate of d to register the above referenced foreign limited liability company to transact business in Florida.,		
Please	return all correspondence c	oncerning this matter to the following:		
	Jiang Lu			
		Name of Person		
	Rinaldi, Finkelstein and Franklin, LLC			
		Firm/Company		
	591 West Pulnar	n Avenue		
	vii 	Address		
	Greenwich, CT (96830		
		City/State and Zip Code		
		E-mail address: (to be used for future unnual report notification)		
Tan Bud	han laftamasilan nanasunlus	•		
1.01 Intr	her information concerning	uns maner, preuse cum:		
	Jiang Lu	ni (203) 422-7771		
•	Name of	Contact Person Area Code Daytime Thlephone Number		
	MAILING ADDRESS:	STREET ADDRESS:		
Division of Corporations Registration Section		Division of Corporations Registration Section		
P.O. Box 6327		Clifton Bullding		
	Taliahassee, FL 32314	2661 Executive Center Circle Tallahasace, PL 32301		
Enclos	ed is a check for the fo	illowing amount:		
	☐ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy		

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

IN COMPLIANCE WITH SECTION 605.0902, ITLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

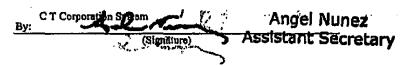
(Name of F	oreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or	"LLC,")
If name unavailable, entr Jability Company," "L.L.	er alternate name adopted for the purpose of transacting business in Florida. The alternate as	une must include "Limited
2 Delaware	3. 27-2773445	
	law of which foreign limited liability (FEI mumber, if applies	ible)
Upon filing		
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, P.S. to determine penalty liability)	SECONOMIALLA
591 West Putnam	Avenuc, Greenwich, CT 06830	<u> </u>
	,	AS:
_	(Street Address of Principal Office)	
591 West Putnum A	venue, Greenwich, CT 06830	7.0
•		NORID ORID
	(Malling Address)	
·	or capacity and address of the person(s) Who has/have authority to me autive Vice President, 591 West Pulnam Avenue, Greenwich, CT 06830	
	ginal certificate of existence, no more than 90 days old, duly authent	
	cords in the jurisdiction under the law of which it is organized. (A plantificate is in a foreign language, a translation of the certificate under	
	Jeon ale	_
; accordance with section 60 a sware that any false infor	Signature of an authorized person 25.0203, F.B., the execution of this document constitutes an administration under the ponetics of partury aution submitted in a document to the Department of State constitutes a third degree follows as provided	that the facts stated herein are true. [d for in £417.155, F.8.)
	Jurome C. Silvey	

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.

1. The name	of the Limited Liability	Company is:	
SLV Castle Onl	ks, L.L.C.		
If unavailable	the alternate to be used	d in the state of Florida is:	,
2. The name		dress of the registored agent and office are:	SECT FALL
	C T Corporation System		三三五
	•	(Name)	3= - F
	1200 South Pine Island I	Rond	SEE OF L
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		田公里
			유 리 8
	Plantation	<u></u> የኒ 33324	B: 23
		City/State/Zip	1

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 605, Florida Statutes.



\$ 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 DELAWARE, DO HERBY CERTIFY "SLV CASTLE OAKS, 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 FOURTEENTH DAY OF MARCH, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE HEEN PAID TO DATE.

4831811 8300

140333759

You may verify this certificate online

Johney W. Bullock, Secretary of State

DATE: 03-14-14