1 of 1

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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(((H14000080820 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA00000023 Phone

: (850)222-1092

Fax Number

: (850)878-5368

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 LO MIAMI TURNPIKE LLC

Certificate of Status	0
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Page Count	05
Estimated Charge	\$125.00

C. LEWIS

APR 7 2014

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

	COV	ER LETTER		•
TO: Registration Section Division of Corporation	_			
Division of Corporator				
SUBJECT: LO MIAMI TURNI	PIKELLC			
	Name of Limite	d Liability Company		
The enclosed "Application by For Existence, and check are submitted."	eign Limited Liability Comp d to register the above refer	puny for Authorization to T enced foreign limited liabil	ransact Business in Florida," Certificat ity company to transact business in Flo	le of rida
Please return all correspondence of	oncerning this matter to the	following:		
MARYANNE E	LLIS			
	N	ame of Person		
LINCOLN PRO	PERTY COMPANY			
		rm/Company		
2000 MCKINN	EY AVENUE, SUITE 1000			
		Address		
Dallas, TX	25201			
Disserted 17		tate and Zip Code		
MELLIS@LPC.	СОМ			
	E-mail address: (to be use	for future annual report notif	ication)	
For further information concerning	g this matter, please call:			
Name o	f Contact Person	at ()Area Code I	Paytima Telephone Number	
MAILING ADDRESS:	STREI	ET ADDRESS;		
	Division of Corporations Division			
		ation Section Building		
Tallahassee, FL 32314		numang xecutivo Conter Circle		
		ssee, FL 32301		
Enclosed is a check for the f				
S125.00 Filing Fee	Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	

APPROVED AND FILED

(3/5)

14 APR -4 AM 8: 32

SECRETARY OF STATE TALL AHASSEE, FLORIDA

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:

1. LO MIAMI TURNPIKE LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, onter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC.")
2. DELAWARB 3.
(furisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. UPON FILING
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 2000 MCKINNEY AVENUE, SUITE 1000, DALLAS, TX 75201
(Street Address of Principal Office)
6. P.O. BOX 1920, DALLAS, TX 75221
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
NON-MEMBER MANAGER, INC., MANAGER
2000 MCKINNEY AVENUE, SUITE 1000, DALLAS, TX 75201
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
murano allo
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 brue, on aware that any fates information authoritied in a document to the Department of Siste constitutes a third degree fatony as provided for in s.817.155, F.S.)
MARYANNE ELLIS, AUTHORIZED PERSON
Typed or printed name of signee

PLDST - 01/14/2014 Websit Khowa Gallat

(4/5)

4/4/2014 9:55:39 From: To: 8506176383

14 APR -4 AM 8: 32

SECRETARY OF STATE TALL AHASSEE, FLORIDA 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.

ACCEPTED OF	The of Leonard		
1. The name of the	Limited Liability Company is:		
LO MIAMI TURNPIKE LLC			
If unavailable, the a	alternate to be used in the state of Florida is:		
2. The name and th	ne Florida street address of the registered agent and office are:		
c	T Corporation System		
	(Name)		
120	90 South Pine Island Road		
••••	Florida Street Address (P.O. Box NOT ACCEPTABLE)		
Ple	city/State/Zip		
liability company a registered agent an statutes relating to	d as registered agent and to accept service of process for the above stated limited the place designated in this certificate, I hereby accept the appointment as add agree to act in this capacity. I further agree to comply with the provisions of all the proper and complete performance of my duties, and I am familiar with and ons of my position as registered agent as provided for in Chapter 605, Florida		
Ву:	(Signature) M. E. Jones, Asst. Sec'y.		
	\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)		

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LO MIAMI TURNPIKE 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 FOURTH DAY OF APRIL, A.D. 2014.

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

DATE: 04-04-14