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Help

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:

lability Company," "L.L.C," or "LLC.")	of transacting business in Florida. The alternate name must include "Lin
Delaware	3,
Jurisdiction under the law of which foreign limited liability company is organized)	(PEI number, if applicable)
(Date first transacted busine: (See sections 605,0904 & 605.0	ss in Florida, if prior to registration.) 1901, F.S. to determine panalty liability)
518 17th St. Suite 1700	400 (5) 400 (5) 100 (5)
Denver CO 80202	dress of Principal Office)
•	17 -
518 17th St. Suite 1700	
Denver CO 80202	gi e
. The name, title or capacity and address of the	Meiling Address) person(s) who has/have authority to manage is/are:
	<u> </u>
7. The name, title or capacity and address of the IPT Real Estate Holdco LLC Member 518 17th St. Suite 1700 Denver CO 80202 3. Attached is an original certificate of existence, aving custody of records in the jurisdiction under acceptable. If the certificate is in a foreign language must be submitted) Signature in accordance with section 605.0203. F.S., the execution of this document.	person(s) who has/have authority to manage is/are: no more than 90 days old, duly authenticated by the of the law of which it is organized. (A photocopy is not ge, a translation of the certificate under oath of the translation of an authorized person a constitutes an affirmation under the penalties of perjury that the facts stated he
The name, title or capacity and address of the IPT Real Estate Holdco LLC Member 518 17th St. Suite 1700 Denver CO 80202 Attached is an original certificate of existence, aving custody of records in the jurisdiction under cceptable. If the certificate is in a foreign language must be submitted) Signature of this document accordance with section 605,0203. F.S., the execution of this document	person(s) who has/have authority to manage is/are: no more than 90 days old, duly authenticated by the of r the law of which it is organized. (A photocopy is not ge, a translation of the certificate under oath of the transport of an authorized person a constitutes an affirmation under the penalties of perjusy that the facts stated he ment of State constitutes a third degree felony as provided for in a.817.155, F.S.

1. The name of the Limited Liability Company is:

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.

CT Corporation System (Name) 1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE) Plantation FL 33324 City/State/Zip Having been named as registered agent and to accept service of process for the above stated limite 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 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. CT Corporation System CT Corporation System CT Corporation System S 100.00 Filing Fee for Application S 25.00 Designation of Registered Agent S 30.00 Certificate of Status (optional)	f unavailab	ele, the alternate to be used in the state of Florida is:	
(Name) 1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE) Plantation FL 33324 City/State/Zip Having been named as registered agent and to accept service of process for the above stated limite 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 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. CT Corporation System Statutes CT Corporation System Statutes CT Corporation System CT CORPORATION S	?. The nam	e and the Florida street address of the registered agent and office are:	SCET
Plantation FL 33324 City/State/Zip Having been named as registered agent and to accept service of process for the above stated limite 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 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. CT Corporation System CT Corporation System CT Corporation System S 100.00 Filing Fee for Application S 25.00 Designation of Registered Agent S 30.00 Certified Copy (optional)		C T Corporation System	
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S 30.00 Certified Copy (optional)		(Signature)	
		(Signature) S 100.00 Filing Fee for Application	

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO BEREBY CERTIFY "IPT MEDLEY DC 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 THIRTIETH DAY OF APRIL, A.D. 2014.

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

5524978 8300

140541979

DATE: 04-30-14

AUTHENTY CATION: 1333682