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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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TO ALKNOWLEDGE

MEDICAL STATES OF SCHOOL SCHOOL





ACCOUNT NO. : 12000000195

REFERENCE : 150913

AUTHORIZATION

COST LIMIT : \$ 155.00

ORDER DATE: May 23, 2014

ORDER TIME : 10:26 AM

ORDER NO. : 150913-005

CUSTOMER NO: 4814233

#### FOREIGN FILINGS

NAME:

HARBORSIDE FL DEVELOPMENT

PARTNERS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX\_\_\_\_ CERTIFIED COPY

PLAIN STAMPED COPY

\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 62956

EXAMINER:

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

. 13

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:

	urpose of transacting business in Florida. The alternate name must include	Limited
iability Company," "L.L.C," or "LL.C.")	46 5725075	
Delaware (Jurisdiction under the law of which foreign limited liabil	3. 46-5725075 (FEI number, if applicable)	
company is organized)	· · · · · · · · · · · · · · · · · · ·	
May 23, 2014		
(Date first transacted by (See sections 605.0904 &	business in Florida, if prior to registration.) δ 605.0905, F.S. to determine penalty liability)	
3424 Peachtree Road NE,	Suite 300	
Atlanta, Georgia 30326		
	ect Address of Principal Office)	
3424 Peachtree Road NE, S	Suite 300	HAY.
Atlanta, Georgia 30326	62	<u></u>
Attanta, Coorgia Coolo	(Mailing Address)	
The name title or conscituend address of	the person(s) who has/have authority to manage is are:	75
	Dw.	$\ddot{\omega}$
Portfolio 10 Holdco, LLC	Manager	
3424 Peachtree Road NE, Su	ite 300	
Atlanta, Georgia 30326		
<u> </u>	nce, no more than 90 days old, duly authenticated by the	
	ander the law of which it is organized. (A photocopy is no	
ceptable. If the certificate is in a foreign lan ust be submitted)	guage, a translation of the certificate under oath of the tra	ansiau
ust be submitted;	7	
_		

Mike Altman, Authorized Representative of Member

Typed or printed name of signee

## 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.

The name of the Limited Liability Company is:  Harborside FL Development Partners, LLC					
lf unavailable,	the alternate to be used i	in the state of Florida is:		<del>_</del>	
2. The name a	and the Florida street add	ress of the registered agent and office are:			
	Corporation Service Con	npany	6.2		
		(Name)	- FACE	7	
	1201 Hays Street		LAH. LAHE	E A	
	Florida Stree	t Address (P.O. Box NOT ACCEPTABLE)		27	1
·	Tallahassee	32301 FL	ms Do		í
		City/State/Zip	ORID	n: L3	
Havina haarina	ruad as ussistand assut	and to accept service of process for the abov			

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.

Corporation Service Company

Sue G. Knight

Assistant Vice President

(Standard)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

#### **COVER LETTER**

TO:	Registration Section
	Division of Corporations

SUBJECT: Harborside FL Development Partners, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Angela E. Biernath, Paralegal
Name of Person
Morris, Manning & Martin, LLP
Firm/Company
3343 Peachtree Road, NE, Suite 1600
Address
Atlanta, Georgia 30326
City/State and Zip Code
abiernath@mmmlaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Angela E. Biernath

...404

504-7725

Name of Contact Person

ode Davtime Telephone Number

#### **MAILING ADDRESS:**

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

#### STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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L DOLOCOO	11. (1) (1)	114071/1	OF THA	T/11	CHIMEN	OIM/AHIMI'
Enclosed	13 a c		UI LIIC	11/1/11	CIVILLE	anicum.

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee & Certificate of Status

■ \$155.00 Filing Fee & Certified Copy □ \$160.00 Filing Fee, Certificate of Status & Certified Copy

## Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "HARBORSIDE FL DEVELOPMENT PARTNERS,

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-THIRD DAY OF MAY,

A.D. 2014.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HARBORSIDE FL DEVELOPMENT PARTNERS, LLC" WAS FORMED ON THE TWENTIETH DAY OF MAY, A.D. 2014.

14 MAY 27 AH IQ: 43
SEURS IN SIGNE
TALLAH ASSEE FLORIDA

5536578 8300

140697322

Jeffrey W Bullock, Secretary of :

AUTHENTYCATION: 1395886

DATE: 05-23-14

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