Division of Corporations

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(((H140001241173)))



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To:

Division of Corporations

Fax Number : (850)617-6383 PLEASE USE ORIGINAL FAX

DATE OF 5/27/14. THANKS.

From:

Account Name : JAM MARK LIMITED

Account Number : I20000000112 : (305)789-7758 Phone : (305)789-7799 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

mail	Address:	carol@thestylesgroup.com	
	•		 

#### Foreign Limited Liability Company SLL PROPERTIES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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MAY 29 2014 J. HARRIS

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## Holland & Knight

Tel (305) 374-8500 Fax (305) 789-7799 Holland & Knight LLP 701 Briokell Avenue Suite 3000 Miami, FL 33131 www.hklaw.com

a**TO:** maalkila saa kilk ii kii taa sii sigaattaa ya asaaya aalaa kagayaya kilka kilka kilkakii, ii kilki ka COMPANY/FIRM FAX NUMBER JENNA (SLL PROPERTIES, LLC) 8506176383 CITY/STATE TELEPHONE NUMBER FROM: NAME TELEPHONE Esmi Diazdon (305) 349-2275 DATE & TIME (Eastern Time Zone) TOTAL PAGES (including Cover Sheet) 5/28/2014 11:01:12 AM CONFIDENTIALITY NOTICE: This facsimile, along with any documents, files, or If you did not receive all of the attachments, may contain information that is confidential, privileged, or otherwise pages or find that they are exempt from disclosure. If you are not the intended recipient or a person responsible for illegible, please call delivering it to the intended recipient, you are hereby notified that any disclosure, (305) 349-2275 copying, printing, distribution or use of any information contained in or attached to this facsimile is strictly prohibited. If you have received this facsimile in error, please immediately notify us by facsimile or by telephone collect at the numbers stated above, and destroy the original facsimile and its attachments without reading, printing, or saving in any manner, Your cooperation is appreciated. Thank you.

MESSAGE: JENNA.

ATTACHED PLEASE FIND THE CORRECTED QUALIFICATION. PLEASE PROCESS TODAY AS WE HAVE A CLOSING. PLEASE USE THE ORIGINAL FAX DATE OF 5/27/14. THANK YOU.

14 MAY 27 AH 10: 23

SECULAR CONTRACTOR

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5/28/2014 11:01:53 AM PAGE 3/008 Fax Server

850-617-6381

5/28/2014 8:54:09 AM PAGE 1/001 Fax Server



May 28, 2014

FLORIDA DEPARTMENT OF STATE

Division of Corporations

JAM MARK LIMITED

SUBJECT: SLL PROPERTIES, LLC

REF: W14000033088

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II FAX Aud. #: H14000124117 Letter Number: 614A00011419

JENNA, PLEASE USE ORIGINAL FAX DATE OF 5/27/14. THANKS.

RECEIVED

14 MAY 28 AM 10: 53
SECRETARY OF STATE
TALLAHASSEF FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

#### H14000124117 3

## 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:

FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:		
1. SLL PROPERTIES, LLC		
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")		
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include Liability Company," "L.L.C," or "LLC.")	de "Limited	
<sub>2.</sub> Delaware <sub>3.</sub> N/A		
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		
4. Upon qualification		
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		
<sub>5.</sub> 3250 Mary Street, Suite 306	NOISIAN	. <b>?</b> }
Miami, Florida 33131	- B	10 10 10 10 10 10 10 10 10 10 10 10 10 1
(Street Address of Principal Office)	7	ŽT a
6. 3250 Mary Street, Suite 306		٠٠٠ خ
Miami, Florida 33131	6	/1 
(Mailing Address)	<u>ب</u> _ ــــ	
	45.	
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are	<b>)</b> ;	
Paul R. Steinfurth - MANAGER		
3250 Mary Street, Suite 306		
Miami, Florida 33131	<del></del>	
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the must be submitted)	not	٢
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 perjuty that the facts state am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.15		rue. '
Paul R. Steinfurth		
Typed or printed name of signee		

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## H14000124117 3 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.

If unavailable, the alternate to be used in the state of Florida is:						
2. The name an	d the Florida street addre	ess of the registered agent and office are:				
	Corporation Service Company					
		(Name)	¥ MAY			
	1201 Hays Str	reet	======================================			
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)				
	Tallahassee	32301 FL	<u>⇔</u>			
		City/State/Zip	$\sim$			

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.

(Signature)

Doreen S. Haeselin, Asst VP

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

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# Delaware

PAGE 1

### The First State

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

DELAWARE, DO HEREBY CERTIFY "SLL PROPERTIES, 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 TWENTIETH DAY OF MAY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SLL PROPERTIES, LLC" WAS FORMED ON THE FIFTEENTH DAY OF MAY, A.D. 2014.

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

5534622 8300

140670090

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

AUTHENTYCATION: 1386366

DATE: 05-20-14

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