M14000003933

(Requestor's Name)
(Address)
(Address).
(City/State/Zip/Phone #)
(City/State/Zip/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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N. Guiligan JUN - 6 2014



ACCOUNT NO. : 12000000195

REFERENCE: 165908 7833946

AUTHORIZATION

COST LIMIT

ORDER DATE: June 5, 2014

ORDER TIME : 11:57 AM

ORDER NO. : 165908-005

CUSTOMER NO: 7833946

FOREIGN FILINGS

NAME: M-3333 DUCK AVENUE ASSOCIATES,

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: Emily Gray -- EXT# 62925

EXAMINER:

COVER LETTER.

TO: Registration Section Division of Corporations

M-3333 Duck Avenue Associates, LLC

Name of Limited Liability Company

Certificate of Status

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:

- · · · ·	-	
Camilo Miguel,	Jr.	
	Name of Person	
MC Manager, L	.LC	
-	Firm/Company	· · · · · · · · · · · · · · · · · · ·
1691 Michigan	Avenue, Ste. 215	
	Address	
Miami Beach, F	L 33139	
`	City/State and Zip Code	
cmigueljr@yaho	oo.com	
E-mail address	: (to be used for future annual report notification)
or further information concerning this matter, plea	se call:	
Camilo Miguel, Jr.	_{at} 305 531-2	2426
Name of Contact Person		Telephone Number
MAILING ADDRESS: Division of Corporations	STREET ADDRESS: Division of Corporations	
Registration Section	Registration Section	
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	
(Tallahassee, FL 32301	
nclosed is a check for the following amou	unt.	
☐ \$125.00 Filing Fee ☐ \$130.00 Filin		\$160.00 Filing Fee, Certif

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

1. M-3333 Duck Avenue Associates, 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 "Lim Liability Company," "L.L.C." or "LLC.")	ited
, Delaware	
(Jurisdiction under the law of which foreign limited liability company is organized) (FEl. number, if applicable)	
4.	· 2
(Date first transacted business in Florida, if prior to registration.). (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	=
5. 1691 Michigan Avenue, Ste. 215	Ī
Miami Beach, FL 33139	2
(Street Address of Principal Office)	
6. 1691 Michigan Avenue, Ste. 215	ي ا
Miami Beach, FL 33139	: u
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	
MC Manager, LLC (MGR)	
1691 Michigan Avenue, Ste. 215	
Miami Beach, FL 33139	
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the office 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 translation be submitted) 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 berein am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in 8.817.155, F.S.)	ator
Camilo Miguel, Jr., President	

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.

1. The name of the Limited Liability Co	' '	
M-3333 Duck Avenue A	Associates, LLC	
If unavailable, the alternate to be used in	the state of Florida is:	
2. The name and the Florida street addre	ess of the registered agent and office are:	
Corporation S	ervice Company	TALLE
	(Name)	
1201 Hays Street		第6 5 E
Florida Street	Address (P.O. Box NOT ACCEPTABLE)	FLO ST
Tallahassee	FL 32301	NIE ORIDA
	City/State/Zip	· -

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.

Emily Gignature ASST VP

\$.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 I

The First State

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

DELAWARE, DO HEREBY CERTIFY "M-3333 DUCK AVENUE ASSOCIATES, 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 FIFTH DAY OF JUNE, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "M-3333 DUCK AVENUE ASSOCIATES, LLC" WAS FORMED ON THE SECOND DAY OF MAY,

A.D. 2014.

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

5527203 8300

140801200

AUTHENTY CATION: 1428587

DATE: 06-05-14

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