

Division of Corporations

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To: Division of Corporations
Fax Number : (850) 617-6383
From: Account Name : FOWLER WHITE BURNETT P.A.
Account Number : 071250001512
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Fax Number : (305) 789-9201

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

Email Address: rrazook@fowler-white.com

Foreign Limited Liability Company
1515 Sunset LLC

Table with 2 columns: Item and Amount. Rows include Certificate of Status (0), Certified Copy (0), Page Count (054), and Estimated Charge (\$125.00).

NOTE:

RE-SUBMITTED TO INCLUDE CERTIFICATE OF GOOD STANDING

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h. BRUCE

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**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. 1515 SUNSET 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 "Limited Liability Company" "L.L.C." or "LLC.")

2. Delaware 3. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable)

4. Upon issuance of certificate of authority to transact business in Florida  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 133 Sevilla Avenue, Coral Gables, Florida, 33134  
(Street address of principal office)

6. 133 Sevilla Avenue, Coral Gables, Florida, 33134  
(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are  
Catherine H. Lorie, Manager, 133 Sevilla Avenue, Coral Gables, Florida, 33134

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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.)

Catherine H. Lorie  
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 true. I 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. 817.155, F.S.)

Catherine H. Lorie  
Type or printed name of signee

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State of Florida  
Secretary of State  
Corporations Division  
Tallahassee, Florida

Re: 1515 SUNSET LLC, a Delaware limited liability company (the "Company")  
Application by Foreign Limited Liability Company for Authorization to Transact  
Business in Florida

Dear Sir/Madam:

In accordance with Section 605.0112(1)(b), Florida Statutes, this letter shall serve as the written consent of the undersigned that the Company may use the name 1515 SUNSET LLC. This consent shall be exclusive and the undersigned reserves the right to determine whether other entities may use the name on a case-by-case basis.

Sincerely,

1515 Sunset LLC, formerly a Florida limited liability company which has converted to a Delaware limited liability company

By: Catherine H. Lorie  
Catherine H. Lorie, Sole Manager

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### 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 Company is:

1515 SUNSET LLC

If name unavailable, the alternate name to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Catherine H. Lorie

(Name)

133 Sevilla Avenue

Florida street address (P.O. Box NOT ACCEPTABLE)

Coral Gables, Florida 33134

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.*

Catherine H. Lorie  
(Signature)

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

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# Delaware

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*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "1515 SUNSET 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 "1515 SUNSET LLC" WAS FORMED ON THE THIRTIETH DAY OF MAY, A.D. 2014.

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

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You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 1428702

DATE: 06-05-14