Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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(((H14000152887 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : FLAGLER DEVELOPMENT GROUP, LLC

Account Number : 120020000144 Phone

: (305)520-2344

Fax Number

: (305)520-2400

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

Email Address:

Foreign Limited Liability Company **Investments Broward County LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

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https://efile.sunbiz.org/scripts/efilcovr.exe

6/25/2014

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□ \$160.00 Filing Fee, Certificate

of Status & Certified Copy

COVER LETTER

TO:	Registration Section
	Division of Cornerations

□ \$125.00 Filing Fee

SUBJECT: Investments Broward County 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:

Kolleen O.P. C	obb	
	Name of Person	
	Firm/Company	
2855 Le Jeune		r
	Address	
Coral Gables, F	FL 33134	
	City/State and Zip Code	
kolleen.cobb@f	eci.com	
E-mail address	: (to be used for future annual rep	ort notification)
For further information concerning this matter, plea	se call:	
Jessica Alvarez	_{ar} 305	,520-2366
Name of Contact Person	Area Code	Daytime Telephone Number
MAILING ADDRESS: Division of Corporations	STREET ADDRESS: Division of Corporations	
Registration Section P.O. Box 6327	Registration Section Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circ Tallahassee, FL 32301	cle
Enclosed is a check for the following amou	ınt:	

□ \$155.00 Filing Fee &

Certified Copy

□ \$130.00 Filing Fee &

Certificate of Status

850-617-6381

6/26/2014 11:00:36 AM PAGE 1/001 Fax Server



June 26, 2014

FLORIDA DEPARTMENT OF STATE

Division of Corporations

FLAGLER DEVELOPMENT GROUP, LLC

SUBJECT: INVESTMENTS BROWARD COUNTY LLC

REF: W14000039844

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.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Teresa Brown
Regulatory Specialist II

FAX Aud. #: H14000152887 Letter Number: 814A00013891

RECEIVED
14 JUN 26 PM 2: 33
NATIONAL OF STATE
TALLAHASSE F FORTA

H140001529873

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. 1 Investments Broward County LLC	IN THE STATE OF FLORIDA.	<i>:</i>
(Name of Foreign Limited Liability Company; must include "Limited L	iability Company," "L.L.C.," or "L	LC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting busi Liability Company," "L.L.C," or "LLC,")	ness in Florida. The alternate name	must include "Limited
_{2.} Delaware 3.		
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable	PER 14
4.		A# 5
(Date first transacted business in Florida, if prior (See sections 605,0904 & 605,0905, F.S. to determ 2855 Le Jeune Rd., 4th Floor	r to registration.) tine penalty liability)	SSEE O
Coral Gables, FL 33134		FLOO
(Street Address of Principal C 5. 2855 Le Jeune Rd., 4th Floor	ffice)	07
Coral Gables, FL 33134		
(Mailing Address)		
7. The name, title or capacity and address of the person(s) who	has/have authority to mana	ige is/are:
Vincent Signorello (P); Michael Reininger (VP); Kolleen Cobl	b (VP, S)
Rafael Rodon (VP, AS); and Juan Godoy (
MBR - AAF Broward TOD Holdings		
B. Attached is an original certificate of existence, no more than 9 having custody of records in the jurisdiction under the law of whiteceptable. If the certificate is in a foreign language, a translation must be submitted) Signature of an authorized in accordance with section 605 0203, F.S., the execution of this document constitutes an affirmation aware that any false information submitted in a document to the Department of State constitution.	0 days old, duly authentica ich it is organized. (A phot of the certificate under oa decrease	ocopy is not th of the translator the facts stated herein are true
Kolleen O.P. Cobb, Vice Pre	esident	

Typed or printed name of signee

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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.

	ble, the alternate to be used in the state of Florida is:	
ii ullavallad	ore, the anemate to be used in the state of Florida is:	
2. The nan	ne and the Florida street address of the registered agent and office are:	
	Kolleen O.P. Cobb	
	(Name)	
	2855 Le Jeune Rd., 4th Floor	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	AMPLIANCE AND ASSESSMENT
	Coral Gables 33134	

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)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT "INVESTMENTS BROWARD COUNTY LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE THIRD DAY OF DECEMBER, A.D. 2012, AT 8:03 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE AFORESAID LIMITED LIABILITY COMPANY, "INVESTMENTS BROWARD COUNTY LLC".

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

5251672 8310

140789975

AUTHENTY CATION: 1420875

DATE: 06-03-14

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