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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H14000152891 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FLAGLER DEVELOPMENT GROUP, LLC

Account Number : I20020000144 Phone : (305)520-2344

: (305)520-2400 Fax Number

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 **FLL Property Ventures LLC**

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

Electronic Filing Menu

Corporate Filing Menu

Help

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

06/27/2014 10:28

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From:3055202400

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COVER LETTER

| 30 babet | FLL Property Ve | ame of Limited Liability Company | |
|---------------------------|--|--|--|
| The enclos Existence, | ed "Application by Foreign Limited Li and check are submitted to register the | iability Company for Authoriza above referenced foreign limit | tion to Transact Business in Florida," Certificate of ed liability company to transact business in Florida. |
| Please retu | rn all correspondence concerning this | matter to the following: | |
| | Kolleen O.P. C | Cobb | |
| | | Name of Person | |
| | | | |
| | | Firm/Company | |
| | 2855 Le Jeune | e Rd., 4th Floo | r |
| | | Address | |
| | | | |
| | Coral Gables, | FL 33134 | |
| | Coral Gables, | FL 33134 City/State and Zip Code | |
| | Coral Gables, kolleen.cobb@ | City/State and Zip Code | |
| | kolleen.cobb@ | City/State and Zip Code | port notification) |
| For further | kolleen.cobb@ | City/State and Zip Code offici.com ess: (to be used for future annual re | eport notification) |
| | kolleen.cobb@ | City/State and Zip Code offici.com ess: (to be used for future annual re | 520-2366 |
| | kolleen.cobb@ E-mall address r information concerning this matter, p | City/State and Zip Code Pleci.com ess: (to be used for future annual re please call: at (305 | |
| <u>.</u> <u> </u> | kolleen.cobb@ E-mall address rinformation concerning this matter, p Jessica Alvarez Name of Contact Person | City/State and Zip Code Process: (to be used for future annual restriction of the control of th | _,520-2366 |
| <u>-</u> <u>-</u> 0 | kolleen.cobb@ E-mall address information concerning this matter, p Jessica Alvarez Name of Contact Person | City/State and Zip Code Please call: at (305 Area Code | _,520-2366 |
| | kolleen.cobb@ E-mail address r information concerning this matter, p Jessica Alvarez Name of Contact Person MAILING ADDRESS: Division of Corporations | City/State and Zip Code Process: (to be used for future annual restriction of Corporations) City/State and Zip Code Street Address: Division of Corporations | _) 520-2366 Daytime Telephone Number |

H14000152891 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:

| FLL Pro | perty Ve | entures LLC | | | | | | | | | | |
|---------------------------------|--|--|------------------------|---|------------------|-------------------|---------------------|-------------|--------------|---------------------------------------|--------------|-------------|
| (Ni | ame of Foreig | gn Limited Liability C | Company: n | nust include "l | Limited 1 | Liability | Compa | ny," "L.L | C.," or " | ·LLC.") | | |
| If name unavaila | | ernate name adopted or "LLC.") | for the purp | pose of transac | cting bus | siness in | Florida. | The alte | rnate nan | ne must inc | lude Lim | ited |
| Delawa | are | | | 3. | | | | | | | | |
| (Jurisdiction u company is o | inder the law | of which foreign limi | ted liability | , | | | (FEI n | umber, il | applicab | le) | | |
| | | (Date first tr | ansacted bu | siness in Flori | da, if pri | or to reg | zistration | n.) | | | | |
| 2855 | Le Jeu | (Sec sections 60 ne Rd., 4th |)5.0904 & 6 | 505.0905. F.S. | to deter | mine per | nalty lial | bility) | | | | |
| | | s, FL 3313 | | | - | | | | | · · · · · · · · · · · · · · · · · · · | | • |
| | | A 1.00 | | t Address of P | rincipal | Office) | | | | | ***** | • |
| _{i.} 2855 L | _e Jeu | ne Rd., 4th | Floo | r | | | | | | | | |
| Coral | Gable | s, FL 3313 | 4 | | | | | | | | | _ |
| | | | | (Mailing A | ddress) | • | | | | | | |
| 7. The nam | e, title or | capacity and add | dress of | the person(| s) who | o has/h | nave au | uthority | y to ma | nage is/ | are: | |
| | | | | | | | | | | | | |
| | | rello (P); M | | | | | | Juee | 11 00 | v) uu | <u>r, s)</u> | - |
| Rafael F | Rodon | (VP, AS); | and J | uan Go | doy | (VP | ', T) | | | | | _ |
| MBR- | AAF | Broward | TOD | Holdin | 195 | ساسا | 0 | | | | | |
| 8. Attached having custo | is an origi ody of reco If the certi | nal certificate or ords in the jurisc ficate is in a for | f existen liction u | ce, no mor | e than w of w | 90 day hich it | ys old, t is org | ganized | i. (A pi | otocopy | y is not | |
| | | | 8 | 2 PCs | 86 | | | | | _ 4, _ | - | |
| In accordance wi | th section 605. | 0203, F.S., the execution submitted in a docu | n of this doc | ure of an at ument constitute Department of S | es an altīi | rmation u | inder the | penalties o | of perjury i | d for m s 81 | 7.155. F.S. | |
| | | Kolleen O | | | | | | | | 74. V. | | ن د ۱ |
| | | | Typed or | r printed na | ame of | signe | c | | | | 7 | * T |
| | | | | | | | | | | 357 Qm | | ا بعود |

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: FLL Property Ventures LLC | | | | | | |
|--|---|--|--|--|--|--|
| If unavailable, the alternate to be used in the state of Florida is: | | | | | | |
| 2. The name 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. Boy NOT ACCEPTABLE) | _ |

Coral Gables 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.

(Signature)

Filing Fee for Application \$ 100.00

25.00 **Designation of Registered Agent**

30.00 Certified Copy (optional)

5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THAT "FLL PROPERTY VENTURES 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 TWENTY-EIGHTH DAY OF JANUARY, A.D. 2013, AT 12:05 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, "FLL PROPERTY VENTURES

LLC".

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

5280269 8310

140789958

You may varify this certificate celine at corp.delaware.gov/authver.shtml

jeffrey W. Bullock, Secretary of State

AUTHENTACATION: 1420856

DATE: 06-03-14

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED ARE TRUE AND CORRECT COPIES OF ALL DOCUMENTS ON FILE OF "FLL PROPERTY VENTURES LLC" AS RECEIVED AND FILED IN THIS OFFICE.

THE FOLLOWING DOCUMENTS HAVE BEEN CERTIFIED:

CERTIFICATE OF FORMATION, FILED THE TWENTY-EIGHTH DAY OF JANUARY, A.D. 2013, AT 12:05 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, "FLL PROPERTY VENTURES LLC".

5280269 8100H

140789958

You may varify this certificate online at corp.dolaware.gov/authver.shtml

Jeffrey W. Bullock, Secretary (CATION: 1420857

DATE: 06-03-14

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State of Delaware Secretary of State Division of Corporations Delivered 12:17 PM 01/28/2013 FILED 12:05 PM 01/28/2013 SRV 130096197 - 5280269 FILE

CERTIFICATE OF FORMATION OF FLL PROPERTY VENTURES LLC

This Certificate of Formation of FLL PROPERTY VENTURES LLC (the "Company") is being executed by the undersigned for the purpose of forming a limited liability company pursuant to the Delaware Limited Liability Company Act.

- 1. The name of the Company is FLL PROPERTY VENTURES LLC.
- 2. The address of the registered office of the Company in Delaware is 2711 Centerville Road, Suite 400, Wilmington, New Castle County, Delaware 19808.
- 3. The name and address of the registered agent for service of process on the Company in the State of Delaware are Corporation Service Company, 2711 Centerville Road, Suite 400, Wilmington, New Castle County, Delaware 19808.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Formation as of the 28th day of January, 2013.

//s// Vivian Rivero

Vivian Rivero, Authorized Person

From:3055202400