Division of Corporations

Page 1 of 1

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(((H14000167408 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Fax Number

: (B50)222-1092 : (850)878-5368 doie of submission 7/14

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Email Address:

### Foreign Limited Liability Company Forbes Miami NE 1st Avenue LLC

Certificate of Status	1
Certified Copy	1
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July 15, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: FORBES MIAMI NE 1ST AVENUE LLC

REF: W14000043359

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.

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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.

Deborah Bruce Regulatory Specialist II FAX Aud. #: H14000167408 Letter Number: 114A00015143

RECEIVED

4 JUL 15 AM 3:21

SECRETARY OF STATE

TALLAHASSEE, FLORIDA

\*RE-SUBMITE = E

## 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 FORFIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	2."}	_
arne unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name m	ust include	 Limited
ility Company," "U.L.C," or "L.I.C.")		
MICHIGAN 3.		
urisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		
UPON FILING		
(Date first transacted business in Florida, if prior to registration.) (See sections 605 0904 & 605.0905, F.S. to determine penalty liability)		
100 GALLERIA OFFICENTRE, SUITE 427		
SOUTHFIELD, MI 48034		
(Street Address of Principal Office)		<b>~</b> 5
100 GALLERIA OFFICENTRE, SUITE 427		
SOUTHFIELD, MI 48034		الل
(Mailing Address)	多楽	_
The name, title or capacity and address of the person(s) who has/have authority to manage	e is/are:	ŧ-
	20 T	<b>A</b>
RBES MIAMI LLC, 100 Galleria Officentre, Suite 427, Scuthfield, MI 48034, member	- <del>12 (11)</del>	- <u>e</u>
	SE.	-
		<u> </u>

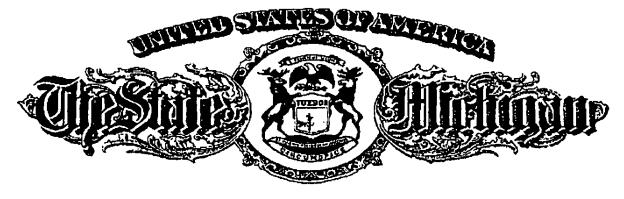
# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

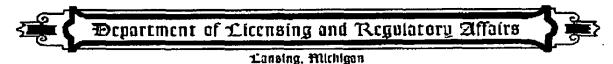
PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name	e of the Limited Liabi	ility Company is:	
FORBES MI	AMI NE 1ST AVENUE L	LLC	
lf unavailabl	le, the alternate to be t	used in the state of Florida is:	
2. The name	e and the Florida stree	et address of the registered agent and off	fice are:
	C T Corporation Sys	stem	
•		(Name)	
	1200 South Pine Isla	and Road	
	Florid	da Sireci Address (P.O. Box NOT ACCEPTABLE)	)
	Plantation	FL 33324	
		City/State/Zip	
liability comp registered ag statutes relat	nany at the place desig gent and agree to act i ing to the proper and	agent and to accept service of process for gnated in this certificate. I hereby accept in this capacity. I further agree to compl complete performance of my duties, and on as registered agent as provided for in	t the appointment as All Solutions of al
	C T Corporation	System Lebecca Bault (Signature)	AM IO: 46  F. STATE LLORIDE
		\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered	

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional) 07/14/2014 12:19:50 PM -0400 DELEG FAXCOM

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This is to Certify That

#### FORBES MIAMI NE 1ST AVENUE LLC

was validly organized on June 9, 2014 as a Limited Liability Company. Said Limited
Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission 1239968

In testimony whereof, I have hereunto set my hand, in the City of Lensing, this 14th day of July, 2014

Alan J. Schelke Director

Corporations, Securities & Commercial Licensing Bureau

2014 JUL 14 AM 10: 48