

2001/004 Page 1 of 1

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((11140001729863)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Pak Number : (850) 617-6383

From:

Account Name : NRAT SERVICES, LLC

Account Number : 100080009104 : (302)674-4089

·: (302)674-5266 Fax Number

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

Email Address: ssarna@crescentheights.com

FLORIDA LIMITED LIABILITY CO. N720CH, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

Electronic Filing Menu

Corporate Filing Menu

Help

B. BOSTICK

JUL 2 3 2014

EXAMINER

7/21/2014

H14000172986 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: 1 N720CH, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name anavailable, enter alternate name adopted for the purpose of transacting business in Florado. The alternate name must include "Limited Liability Company," "L.L.C," or "L.L.C,") _{2.}Delaware (Jurisdiction ander the liew of which foreign limited liability Upon qualification (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty hability) 2200 Biscayne Boulevard Miami, FL 33137 (Street Address of Principal Office) Same (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage N540CH Holdings, LLC, Manager, 2200 Biscayne Boulevard, Miami, FL 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)

Signature of an authorized person

(In accordance with section 605.0203, P.S., the execution of this document constitutes an offirmation under the penaltics of perjury that the facts stated herein are true. I am aware that any false information authorized in a document to the Department of State constitutes a third degree fellow as provided for in a B17,155, F.S.)

Shlomo Dachoh, Secretary

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.

N720CH, LLC			
If unavailable, the	ne alternate to be used in the	state of Florida is:	at the beginning of the second
2. The name an	d the Fforida street address o	of the registered agent and office ar	re:
	NRAI Services, Inc.		201 SF TAL
	(Name) 1200 South Pine Island Road		SEGRETAR ALLAHASS
		ress (P.O. Box NOT ACCEPTABLE)	محد لمفيا
	Plantation	pt_33324 City/State/Zip	A 8: 48 OF STATE E. FLORIDA
liability company registered agent statutes relating accept the oblige Statutes.	o at the place designated in the and agree to act in this capa to the proper and complete p	o accept service of process for the oblis certificate, I hereby accept the active. I further agree to comply with cerformance of my duties, and I amtered agent as provided for in Chap	ppointment as 1 the provisions of all familiar with and
	\$ 100.00 \$ 25.00 \$ 30.00	Filing Fee for Application Designation of Registered Agen Certified Copy (optional)	it

\$ 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 "N720CH, 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 TWENTY-FIRST DAY OF JULY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "N720CH, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF JULY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE

NOT BEEN ASSESSED TO DATE.

FILED
2014 JUL 21 A 8: 48
STATE

5571915 8300

140975525

You may verify this certificate online

AUTHENTY CATION: 1551182

DATE: 07-21-14