M14000005733

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
·		
(Cit	ty/State/Zip/Phone	e #1
(OII	.yrotatorzipii ilott	<i>-</i> ",
PICK-UP	☐ WAIT	MAIL
-		
(Bı	isiness Entity Nar	ne)
(Dr	ocument Number)	
(=-	, ,	
Continue Continu	Cartificator	s of Status
Certified Copies	_ Certificates	s or Status
Special Instructions to	Filing Officer:	
		}
		[

Office Use Only



800262986308

mun 949

2014 AUG -5 PH 1: 5.

2014 AUG -5 AM 9: 45
SECKETARY OF STATE
ANASSEE ELORINA

FILED



ACCOUNT NO. : 12000000195

REFERENCE : 243968

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : August 4, 2014

ORDER TIME : 8:44 AM

ORDER NO. : 243968-005

CUSTOMER NO: 7963420

File 2nd (after dissolution

FOREIGN FILINGS

NAME:

AVENTURA HARBOUR BORROWER,

 $_{
m LLC}$

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:



August 8, 2014

CSC

ATTN: COURTNEY WILLIAMS

RESUBMIT

Please give original submission date as file date.

SUBJECT: AVENTURA HARBOUR BORROWER, LLC

Ref. Number: W14000047999

We have received your document for AVENTURA HARBOUR BORROWER, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

The affidavit or letter releasing the name must be a separate doucument attached to the new filing. The statement in the dissolution does not constitute a name release..

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.

Tim Burch Regulatory Specialist II

Letter Number: 314A00016828

AVENTURA HARBOUR BORROWER, LLC | 750 B Street, Suite 2620 | San Diego, CA 92101 (619) 294-8989 (619) 294-8995 fax

Attn: Tim

To whom it may concern,

Being an authorized person of Aventura Harbour Borrower, LLC, Florida document number L14000121330, I hereby certify that after our withdrawal, filed on August 5, 2014, we have no intentions of revoking said withdrawal.

If you have any questions or concerns or need anything further please let me know.

Thank you for your help and consideration in this matter.

Sincerely,

Aventura Harbour Borrower, LLC

Venniter Connolly

TALEST OF STATES OF AN ALLES

FILED

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. Aventura Harbour Borrower, LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," o	r "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate national Liability Company," "L.L.C." or "LLC,")	ame must include "Limited
, Delaware	
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applic	able)
4. (Date first transacted business in Florida, if prior to registration.)	
(See sections 605,0904 & 605,0905. F.S. to determine penalty liability)	18 28
_{5.} 750 B Street, Suite 2620	- 59 E 7
San Diego, CA 92101	MASSON &
(Street Address of Principal Office)	mg -
6. 750 B Street, Suite 2620	- F. S.
San Diego, CA 92101	5 5 5 S
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to m	anage is/are:
Todd Mikles, Vice President 750 B Street, Suite 2620, San Diego,	CA 92101

8. Attached is an original certificate of existence, no more than 90 days old, duly authen-	
having custody of records in the jurisdiction under the law of which it is organized. (A p	
acceptable. If the certificate is in a foreign language, a translation of the certificate under must be submitted)	oath of the translator
· ·	
Change I A Day	
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 am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provide	
Jennifer Connolly	
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.

The name of the Limited Lia Aventura Harbour Borrower, LLC	bility Company is:	
If unavailable, the alternate to be	e used in the state of Florida is:	
2. The name and the Florida str	eet address of the registered agent and office are:	21W 1
Corporation Sen	vice Company	E FI
-	(Name)	SSEE 5
1201 Hays Stree	et	# 9 P
Flor	ida Street Address (P.O. Box NOT ACCEPTABLE)	表
Tallahassee	FL ³²³⁰¹	
	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.

Corporation Service Company

By:

Carina L. Dunlap

Asst. Vice President

(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

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "AVENTURA HARBOUR BORROWER, 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 AUGUST, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AVENTURA HARBOUR BORROWER, LLC" WAS FORMED ON THE SIXTEENTH DAY OF MAY, A.D. 2014.

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

5535426 8300

141034288

Jeffrey W Bullock, Secretary of State

AUTHENTY CATION: 1593485

DATE: 08-05-14

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