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Corporate Filing Menu

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9/10/2014

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;

[Sun Malted II, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability"	Company, "L.L.C." or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transaxing business in I Liability Company," "L.L.C." or "LLC.")		
2. Delaware 3 90-0982620		
(Jurisdiction under the law of which foreign limited liability company is organized)	(PEI number, if applicable)	
4. October 5, 2012	SEP SEP	-
(Date first transacted business in Florida, if prior to regi (See sections 605,0904 & 605,0905, F.S. to defermine pen	stration.) alty liability)	•
5 5200 Town Center Circle, Suite 600	A P	
Boca Raton, FL 33486	T.00 -	
(Street Address of Principal Office)		_
6. 5200 Town Center Circle, Suite 600		11
Boca Raton, FL 33486		
(Mailing Address)		
7. The name, title or capacity and address of the person(s) who has/har Sun Malted I, LLC (Member - Managed)	ve authority to manage is/are:	
5200 Town Center Circle, Suite 600		
Boca Raton, FL 33486		
8. Attached is an original certificate of existence, no more than 90 days having custody of records in the jurisdiction under the law of which it is acceptable. If the certificate is in a foreign language, a translation of the must be submitted) Manual Mc One	s organized. (A photocopy is not certificate under oath of the translator	ī
Michael J. McConvery, Vice President		

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.

1. The nam	c of the Limited Liabilit	y Company is:	
Sun Malled II, LLC			
lf unavailab	le, the alternate to be use	ed in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:			
•	C T Corporation System	n	
		(Name)	
	1200 South Pine Island		
	Florida S	street Address (P.O. Box NOT ACCEPTABLE)	
	Plantation	FL 33324	
		City/State/Zip	
liability comp registered ag statutes relat	pany at the place design ent and agree to act in t ing to the proper and co	ent and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointment as his capacity. I further agree to comply with the provisions of all mplete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 605, Florida Maria T. Chambers Special Assistant Secretary (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 "SUN MALTED II, 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 TENTH DAY OF SEPTEMBER, A.D. 2014.

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

5222180 8300

141162391

You may verify this cortificate anline at corp. deleware. dov/authwer. whiml

Jeffrey W. Bullock, Secretary of State

DATE: 09-10-14