# M1400006754

| (Req                      | uestor's Name)   |                |
|---------------------------|------------------|----------------|
| (Add                      | ress)            |                |
| (Add                      | lress)           |                |
| (City                     | /State/Zip/Phone | #)             |
|                           |                  | MAIL           |
| (Bus                      | iness Entity Nam | e)             |
| (Doc                      | ument Number)    | ····· <b>·</b> |
| Certified Copies          | Certificates     | of Status      |
| Special Instructions to F | iling Officer:   |                |
|                           |                  |                |
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| haaaa                     | Office Use Only  | /              |



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CORPORATION SERVICE COMPANY'

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|              | ACCOUNT NO.      | :   | I2000000  | 0195    |  |
|--------------|------------------|-----|-----------|---------|--|
|              | REFERENCE        | :   | 301275    | 7833946 |  |
|              | AUTHORIZATION    | Ŀ   | metsele   | han     |  |
|              | COST LIMIT       | : ( | \$ 130.00 |         |  |
| ORDER DATE : | September 17, 20 | 14  |           |         |  |
| ORDER TIME : | -                |     |           |         |  |
| ORDER NO. :  | 301275-020       |     |           |         |  |
| CUSTOMER NO: | 7833946          |     |           |         |  |
| •••••        |                  |     |           |         |  |

#### FOREIGN FILINGS

NAME: M-4000 ALTON INVESTOR, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- \_\_\_\_\_ CERTIFIED COPY
- PLAIN STAMPED COPY

   XX
   CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

## COVER LETTER

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TO:

\_ . \_ . . . . . . . . . .

| Division of Corporations<br>SUBJECT: M-4000 ALTON INVESTOR, LLC  |
|--|
| SUBJECT:   |
| The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida. |
| Please return all correspondence concerning this matter to the following:  |
| Camilo Miguel, Jr.   |
| Name of Person   |
| M-4000 Alton MGR, LLC  |
| <br>Firm/Сотралу   |
| 119 Washington Avenue, Ste. 505  |
| Address  |
| Miami Beach, FL 33139  |
| City/State and Zip Code  |
| cmigueljr@yahoo.com  |
| E-mail address: (to be used for future annual report notification)   |
| For further information concerning this matter, please call:   |
| Camilo Miguel, Jr305531-2426   |
| Name of Contact Person     at ()       Area Code     Daytime Telephone Number  |
| MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301Tallahassee, FL 32301                          |
| Enclosed is a check for the following amount:  |

Certificate of Status □ \$155.00 Filing Fee & LJ \$160.00 Filing Fee, Certificate Certified Copy of Status & Certified Copy □ \$125.00 Filing Fee



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 18, 2014

CSC COURTNEY WILLIAMS

Ņ RESUE Please give original submission date as file date.

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SUBJECT: M-4000 ALTON INVESTOR, LLC Ref. Number: W14000057184

We have received your document for M-4000 ALTON INVESTOR, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 414A00020004

SECRE TARY OF STATE BIVISION OF CORPORATION 14 SEP 17 AM 10: 55

www.sunbiz.org Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

#### 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. M-4000 Alton Investor, 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 transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.")

| company is organized)   |          | 1259     |
|---|----------|----------|
| 4.  | 5        | NIN SI   |
| (Date first transacted business in Florida, if prior to registration.)<br>(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) | 1<br>CED | SIGN CRE |
| 5. 119 Washington Avenue, Ste. 505  |          |          |
|   | A.       |          |
| (Street Address of Principal Office)  | Ö        | <br>N -  |
| 6. 119 Washington Avenue, Ste. 505  | ۍ<br>برد |          |

Miami Beach, FL 33139

(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

## M-4000 Alton MGR, LLC (MGR)

119 Washington Ave., Ste. 505

Miami Beach, FL 33139

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, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 1 am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Camilo Miguel, Jr.

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 name of the Limited Liability Company is:

# M-4000 Alton Investor, 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:

| Corporation \$ | Service | Company  |  |
|----------------|---------|----------|--|
|                |         | <u>,</u> |  |

(Name)

# 1201 Hays Street

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Tallahassee,

32301 FL

14 SEP 17 4410: 55

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)

- \$ 100.00 Filing Fee for Application
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (optional)
- \$ 5.00 Certificate of Status (optional)



PÁGE 1

The First State

I, JEFEREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "M-4000 ALTON INVESTOR, 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 SEVENTEENTH DAY OF SEPTEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "M-4000 ALTON INVESTOR, LLC" WAS FORMED ON THE THIRD DAY OF SEPTEMBER, A.D. 2014.

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



5596603 8300

141188989 You may verify this cartificate online at corp.delaware.gov/authver.shtml

Jeffrey W Bullock. Secretary of State AUTHENTYCATION: 1705115

DATE: 09-17-14