

M 14000007004

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

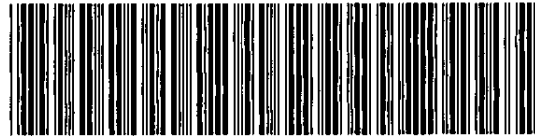
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS

N. Gulligan SEP 30 2014

CT Corporation System

515 E. Park Ave., Tallahassee, FL, 32301

850-205-8842

TAURUS CD 119 MEZZ MM, LLC**Thank you!**

<input type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input checked="" type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	
Registration	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input checked="" type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input checked="" type="checkbox"/> CUS
New Registration		
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

9/29/2014

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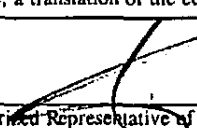
Order#:
9292480

Ref#: _____

Amount: \$ _____

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF
FLORIDA:*

SECTION I
1. Name of Foreign Limited Liability Company: CD 119 Taurus Mezz, LLC
2. Jurisdiction under the Law of which the Foreign LLC is organized: Delaware
3. FEIN (if applicable): N/A
4. Date First Transaction Business in Florida (if prior to registration): N/A
5. Street Address of Principal Office: 610 North Wymore Road, Suite 200, Maitland, Florida 32751
6. Mailing Address: 610 North Wymore Road, Suite 200, Maitland, Florida 32751
7. Name, title or capacity and address of the person(s) who has/have authority to manage is/are: Name: Jeffrey K. McFadden Title: Manager Address: 610 North Wymore Road, Suite 200, Maitland, Florida 32751
8. Attached is an original certificate of existence, no more than ninety (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.)
<div style="display: flex; justify-content: space-between;"><div>Signature  _____ John Kingman Keating, Authorized Representative (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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155, F.S.)</div><div>Date: <u>9/24/14</u></div></div>

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**REGISTERED AGENT CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE AND ACCEPTANCE**

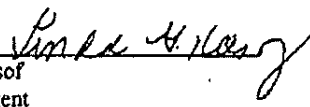
Pursuant to the provisions of Section 605.0113 or 605.0902(1)(d), *Florida Statutes*, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

CD 119 Taurus Mezz, LLC, a Delaware limited liability company (the "Company") desiring to obtain authorization to transact business in Florida as a foreign limited liability company hereby names and designates Linda G. Kassof as its Registered Agent to accept service of process within the State of Florida with its registered office located at 610 North Wymore Road, Suite 200, Maitland, Florida 32751.

ACKNOWLEDGMENT

Having been named as Registered Agent and to accept service of process for the above stated 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*.

DATED this 26th day of September, 2014.



Linda G. Kassof
Registered Agent

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TALLAHASSEE, FLORIDA

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CD 119 TAURUS MEZE, 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-FIFTH DAY OF SEPTEMBER, A.D. 2014.

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

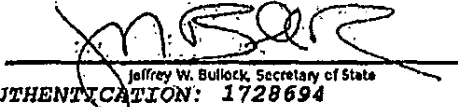
AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CD 119 TAURUS MEZE, LLC" WAS FORMED ON THE TWELFTH DAY OF SEPTEMBER, A.D. 2014.

5602397 8300

141220120

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1728694

DATE: 09-25-14