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#### FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

10/8/14

NAME:

NXRTBH SABAL PALMS, LLC

TYPE OF FILING: APPLICATION

COST:

155.00

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA00000015

**AUTHORIZATION:** 

ABBIE/PAUL

#### **COVER LETTER**

TO:	Registr Divisio	tion Section of Corporations			
erini	ECT:	NXRTBH Sabal Palms, LLC			
3013	EC1:	Name of Limited Liability Company			
The ca Existe	nclosed "A nce, and cl	plication by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certifeck are submitted to register the above referenced foreign limited liability company to transact business in	ficate of Florida		
Please	retum all	orrespondence concerning this matter to the following:			
		Helen Kim			
		Name of Person			
Highland Capital Management, LP					
	Firm/Company				
	300 Crescent Court, Suite 700				
	Address				
	Dallas, TX 75201				
City/State and Zip Code					
		hkim@highlandcapital.com  E-mail address: (to be used for future annual report notification)			
For fu	rther infor	nation concerning this matter, please call:			
10.10		en Kim Name of Contact Person  at (972 ) 419-2513  Daytime Telephone Number			
		Name of Contact Person Area Code Daytime Telephone Number			
	Divisio Registra P.O. Bo	NG ADDRESS:  of Corporations  ion Section  6327  see, FL 32314  STREET ADDRESS:  Division of Corporations  Registration Section  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301			
Enclo		heck for the following amount:  00 Filing Fee	ate		

## 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: NXRTBH Sabal Palms, 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.") Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 300 Crescent Court, Suite 700 Dallas, TX 75201 (Street Address of Principal Office) 300 Crescent Court, Suite 700 Dallas, TX 75201 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Brian Mitts, Authorized Officer 300 Crescent Court, Suite 700 Dallas, TX 75201 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. 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 s.817.155, F.S.)

**Brian Mitts** 

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.

NXRTBH Sabal Palr	•	
If unavailable, the alternate to be used in the	e state of Florida is:	THE COL
2. The name and the Florida street address	of the registered agent and office are:	る。
CT Corporation	System	200
	(Name)	
1200 S. Pine Is		
Florida Street Add	-	
Plantation	33324 FL	
	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) Kusta Ali Assl-Sec.

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

# Delaware

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NXRTBH SABAL PALMS, 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 EIGHTH DAY OF OCTOBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NXRTBH SABAL PALMS, LLC" WAS FORMED ON THE FIFTEENTH DAY OF SEPTEMBER, A.D. 2014.

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

5603627 8300

141268851

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

Jeffrey W. Bullock, Secretary of State
AUTHENTYCATION: 1762321

DATE: 10-08-14