

m/4000007755

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

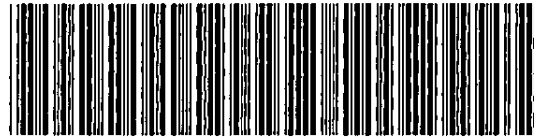
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

B. BOSTICK

OCT 27 2014

EXAMINER

**CT Corporation System**

515 E Park Avenue, Tallahassee, FL, 32301 850-205-8842

ATLAS 2800 NMA LLC

☐ Nonprofit  
☐ Domestic Corporation

☐ Limited Partnership  
☒ LLC  
Formation

☒ Certified Copy  
Formation

☒ Walk In  
☐ Mail Out

Name

Availability \_\_\_\_\_

Document

Examiner \_\_\_\_\_

Updater \_\_\_\_\_

Verifier \_\_\_\_\_

W.P. Verifier \_\_\_\_\_

☐ Amendment

☐ Dissolution/Withdrawal

☐ Reinstatement

☐ Annual Report

☐ Name Registration

☐ Fictitious Name

☐ Photocopies

☐ Will Wait

☐ Merger

☐ Mark

☐ Other

☐ CUS

☐ After 4:30

☒ Pick Up

Order#:

**9322063**

Ref#:

Amount: \$

10/24/2014

**KM**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

OR

ATLAS 2800 NMA LLC

*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. Name of the Foreign Limited Liability Company: ATLAS 2800 NMA LLC  
("Company")
2. Jurisdiction under the law of which the Company is organized: Delaware
3. FEI number, if applicable:
4. Date first transacted business in Florida, if prior to registration:
5. Street Address of Principal Office: c/o Atlas Capital Group, LLC, 505 Fifth Avenue, 28<sup>th</sup>  
Floor, New York, New York 10017
6. Mailing Address: c/o Atlas Capital Group, LLC, 505 Fifth Avenue, 28<sup>th</sup> Floor, New  
York, New York 10017
7. The name, title or capacity and address of the person(s) who has/have authority to  
manage is/are: Jeffrey A. Goldberger, Authorized Signatory, c/o Atlas Capital Group,  
LLC, 505 Fifth Avenue, 28<sup>th</sup> Floor, New York, New York 10017
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 the Company is organized.

MEMBER:

JAG 2800 NMA-LLC

By: 

Name: Jeffrey A. Goldberger  
Title: Authorized Signatory

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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(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. §17.155, F.S.)

**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:

**ATLAS 2800 NMA LLC**

If unavailable, the alternate to be used in the state of Florida is:


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2. The name and Florida street address of the registered agent and office are:

NRAI Services, Inc.  
1200 South Pine Island Road  
Plantation, FL 33324

*Having been named as registered agent and to accept service of process for the above named limited liability company at the place designated in this certificate, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and the undersigned is familiar with and accepts the obligations of its position as registered agent as provided for in Chapter 605, Florida Statutes.*

NRAI SERVICES, INC.

By:   
Print Name: Michele Holden  
Title: Assistant Secretary

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TALLAHASSEE, FLORIDA

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# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ATLAS 2800 NMA 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-FIRST DAY OF OCTOBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ATLAS 2800 NMA LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF AUGUST, A.D. 2014.

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

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TALLAHASSEE, FLORIDA

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You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 1797087

DATE: 10-21-14