Florida Department of State

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Foreign Limited Liability Company LA Playa MM, LLC

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Electronic Filing Menu

Corporate Filing Men 1026. AON ANTEL

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 LA PLAYA MM, LLC	TRANSACT BUSINESS IN THE STATE	OF FLORIDA:	
	Liability Company; must include "Lim	ned Liability Company," "L.L.C.," or	"LLC.")
(If name unavailable, enter alterna consent of the managers or manage Company," "L.L.C," "LLC.")	te name adopted for the purpose of training members adopting the alternate name	isacting business in Florida and attach ne. The alternate name must include "	s copy of the written Limited Liability
2. Delaware	3.		
(Jurisdiction under the law of w company is organized)	hich foreign limited liability	(FEI number, if applicable)	
4			
(See se	first transacted business in Florida, if ctions 605.0904 & 605.0905, F.S. to d	prior to registration.) etermine penalty liability)	A S
5. c/o Chateau Group, LL	.C		9
1000 E. Hallandale Be	ach Blvd., Suite B, Hallandalı		CT S
	(Street Address of Princ	ipal Office)	šša: 🎞
6. c/o Chaleau Group, LL	C		
1000 E. Hallandale Bea	ach Blvd., Suite B, Hallandale		FLO.
	(Mailing Addre	255}	
7. The name, title or capaci	ty and address of the person(s) v	vho has/have authority to mana	35
La Playa CF LLC, Manag	ing Member		
c/o Chateau Group, LLC,	1000 E. Hallandale Beach B	lvd., Suite B	
Hallandale Beach, FL 33	009		
in the jurisdiction under the law of	e of existence, no more than 90 days old which it is organized. (A phoseopy is all of the translator must be submitted.)		
(In accordance with	Signature of an of the section 605.0202. F.S., the execution of all	1 ' L 1	nder the
penalties of perjury document to the	y that the facts stated herein are took fam. Department of State constitutes a third	aware this any false information subm	nitted in a
Manı	uel Grosskopf	<u> </u>	
	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.

LA PLAYA MM, 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: Manuel Grosskopf	1. The name o	The Limited Liability Comp	any is:						
2. The name and the Florida street address of the registered agent and office are: Manuel Grosskopf	LA PLAYA MM, LLC								
Manuel Grosskopf (Name) 1000 E. Hallandale Beach Blvd. Florida Street Address (P.O. Box NOT ACCEPTABLE) Hallandale Beach FL 33009 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 are registered agent as provided for in Chapter 605, Florida Statutes. S 100.00 Filing Fee for Application S 25.00 Designation of Registered Agent S 30.00 Certified Copy (optional)	If unavailable,	If unavailable, the alternate to be used in the state of Florida is:							
(Name) 1000 E. Hallandale Beach Blvd. Florida Street Address (P.O. Box NOT ACCEPTABLE) Hallandale Beach FL 33009 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. \$ 100.00 Fling Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)	2. The name a	nd the Florida street address	of the registered	agent and office are:					
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a also provided to the property of the propert		\$ 30.00	Certified Cop	y (optional)					

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LA PLAYA MM, 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 THIRTY-FIRST DAY OF OCTOBER, A.D. 2014.

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

5631120

DATE: 10-31-14