Division of Corporations

Page 1 of 2



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

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#### Foreign Limited Liability Company Colonnade Clematis LLC

Certificate of Status	1
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Page Count	05
Estimated Charge	\$130.00

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11/19/2014

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TO:	Registration Section Division of Corporations					
SUBJE	ECT: Colonnade Clematis LLC					
		Name of Limited Liability Compr	any			
The en- Existen	closed "Application by Foreign Limitence, and check are submitted to register	d Liability Company for Authori the above referenced foreign lin	zation to Tr nited liabilit	ansact Business in ly company to trans	Florida," Certi act business in	ficate of Florida
Please	return all correspondence concerning t	his matter to the following:				
	Justine Violante					
		Name of Person				
	Colonnade Properties LLC					
	· · · · · · · · · · · · · · · · · · ·	Firm/Company				
	380 Lexington Avenue, Suit	ie 710				
		Address		-	<del></del>	
	Many Mark, MW, 1014B					
	New York, NY 10168	City/State and Zip Code	· · · ·		<del></del> -	
		, , ,				
	jc@colonnadeproperties.com E-mail s	i ddress: (to be used for fittire annual	report notifi	eaction)		
For fur	ther information concerning this matter	r, please call:				
	Brian Keller	ni{212	632-69	900		
	Name of Contact Per		de D	aytime Telephone Nu	mber	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporation Registration Section Clifton Building 2661 Executive Center Tullahassee, I'L 32301				
Enclo	sed is a check for the following.	amount:			<u> </u>	
	□ \$125.00 Filing Fee □ \$130.00	D Filling Fee & □ \$155.00 Fi ate of Status Certified (		S160.00 Filin of Status & (	ry Fee, Certific Certified Gopy,	61 AON 11
					<u> </u>	PH 2:
					STATE LORIDA	29

### 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:

Colonnado Clem	antic I 1 C	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	01 00001220 11	, THE BINIE OF	7 LOIGD71.		
	of Poreign Limited Liability	y Company; must l	nchide "Limited Li	nbility Company," "I	IC.," or "I.I.C.	")	_
							_
l'name unavailable, lability Company," "	enter alternate name adopte	ed for the purpose o	of transacting busin	ess in iderida. The a	ternate name mus	t include "f.	imited
Delaware			3.				
(Jurisdiction under company is organi	the law of which foreign li ized)	niled liability		(FEI mumber,	if applicable)		
· <del></del>	(Date first	Imitancied business	s in Florida, il prior	to registration.) ine penalty liability)			-
	face ecclions						
·	<del></del> -	·	·	<del></del>			
e/o Colonnado	Properties LLC, 380 Lex		Suite 710, New Y Iross of Principal O			<del></del> _	_
٠		· · · · ·	<del></del>	·			<u> </u>
same as above							
		<b>(</b> M	failing Address)				
7. The name, ti	tle or capacity and a	ddress of the p	erson(s) who l	nas/have authori	ty to manage	is/arc:	
weenh C. Cumhuse							
uscph S. Snnibuco	<u>'                                    </u>						_
380 Lexington	n Avenue, Suite	710					
lew York, Nei	w York 10168						
aving custody of	n original certificate of records in the juris e certificate is in a fo	sdiction under	the law of whi	ich it is organize	d. (A photoc	apy is no	t
in accordance with section aware that any false	ion 605.0203, F.S., the execut information submitted in a doc	Signature of the Department of	fan authorize constitutes na affirma ment of State constitu	d person nion under the penaltic les a third degree felon	s of perjury that the y as provided for in	theis stated h s.817,155, F.	errin are tru S.)
	Joseph S. Sambi	ico					-
			ited name of s	gnee		CRETARY	61 AON
		•	•	•		E PERS	K

## 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:  Colonnade Clematis LLC				
If unavailabl	e, the alternate to be used	in the state of Florida is:		
2. The name	and the Florida street ad	dress of the registered agent and office are:		
	C T Corporation System			
		(Naine)		
	1200 South Pine Island I	Road		
	Florida St	rect Address (P.O. Box NOT ACCEPTABLE)		
	Plantation	FL 33324		
		Clty/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.

C T Corporation System By:							
(Signa	iture)						
\$ 100.00	Filing Fee for Application						
\$ 25.00	Designation of Registered Agent						
\$ 30.00	Certified Copy (optional)						
S 5.00	Certificate of Status (ontional)						

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# Delaware

PAGE

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "COLONNADE CLEMATIS 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 EIGHTEENTH DAY OF NOVEMBER, A.D. 2014.

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

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ALL ARLASSEE FLORIDA

5554131 8300

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You may verify this cortificate online at corp.dolaware.gov/authvor.shtml

jeffrey W. Bullock, Secretary of State

DATE: 11-18-14