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ACCOUNT NO. : I2000000195

REFERENCE : 388874 4307171

AUTHORIZATION

COST LIMIT

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ORDER DATE: November 21, 2014

ORDER TIME : 3:49 PM

ORDER NO. : 388874-010

CUSTOMER NO: 4307171

#### FOREIGN FILINGS

NAME: 4220 SEAGRAPE MANAGER LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

\_\_\_ PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

#### **COVER LETTER**

To: Registration Section
Division of Corporations

SUBJECT: 

4220 Seagrape Manager LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

David Buckley, Esq.

Name of Person

Rogin Nassau LLC

Firm/Company

185 Asylum Street, 22nd Floor

Address

Hartford, CT 06103

City/State and Zip Code

dbuckley@roginlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Buckley

,860

256-6300

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle

Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

□ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

■ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLL FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE S.	
4220 Seagrape Manager LLC	INTEON PLONDA.
(Name of Foreign Limited Liability Company; must include "Limited Liability Con	npany," "L.L.C.," or "LLC.")
(If name unavailable; enter alternate name adopted for the purpose of transacting business in Flor Liability Company, "L.L.C." or "LLC.")	ida. The alternate name must include "Limited
Delaware	ı <b>s</b>
z. <u> </u>	I number, if applicable)
4. <u> </u>	
(Date first transacted business in Florida, if prior to registra (See sections 605.0904 & 605.0905, F.S. to determine penalty	lion.) liability)
s c/o Hagan Brown	
20 Avon Meadow Lane, Suite 120, Avon, Con (Street Address of Principal Office)	necticut 06001
20 Avon Meadow Lane, Suite 120	
Ayon, Connecticut 06001	
(Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have Hagan Brown, Manager	authority to manage is/are:
20 Avon Meadow Lane, Suite 120	
Avon, Connecticut 06001	
3. Attached is an original certificate of existence, no more than 90 days of naving custody of records in the jurisdiction under the law of which it is o acceptable. If the certificate is in a foreign language, a translation of the centust be submitted)  Signature of an authorized person	rganized. (A photocopy is not
In accordance with section 605,0203, F.S., the execution of this document constitutes an all influence runder the maware that any lake information submitted in a document to the Department of State constitutes a third de-	e penalties of perjury that the facts stated herein are true, gree felony as provided for in s.817.155, F.S.)
Hagan Brown, Manager	

Typed or printed name of signce

## 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.

The name of the Limited Liability Company is:  4220 Seagrape Manager LLC				
If unavailab	le, the alternate to be used in	n the state of Florida is:		
2. The nam	e and the Florida street addr	ress of the registered agent and office are:		
Corporation Service Company		三至		
		• •	and the second second	
		(Name)		
	1201 Hays Street			
		(Name)		

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.

Corporation Service Company

By:

(Signature)

Courtney Williams

Asst. Vice President

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

## Delaware

PAGE 1

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "4220 SEAGRAPE MANAGER 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 NOVEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "4220 SEAGRAPE MANAGER LLC" WAS FORMED ON THE TWENTIETH DAY OF NOVEMBER, A.D. 2014.

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

5644030 8300

141443862

AUTHENTY CATION: 1890323

DATE: 11-21-14

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