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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H15000009826 3)))



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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

: (850)878-5368 Fax Number

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

mail Address:	

Foreign Limited Liability Company ATLANTIC PROPERTIES I, LLC

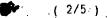
Certificate of Status Certified Copy 0 Page Count 05 Estimated Charge \$125.00

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COVER LETTER

TO:	Registration Section
	Division of Corporation

Atlantic Properties I, LLC

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:

E. Roe Stamps, IV	<i>'</i>
	Name of Person
	Firm/Company
	rintiv Company
3725 Leafy Way	
	Address
Miami, FL 33133	
Ci	ity/State and Zip Code
StampsFamilyOffic	ce@venturetax.com
E-mail address: (to be	used for future annual report notification)

For further information concerning this matter, please call:

David H. Hopfenberg

Name of Contact Person

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 FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(If name unavailable, enter alternate name adopted for the purpo	ose of transacting business in Florida. The alternate name must include "Limited
Liability Company," "L.L.C," or "LLC.")	
_{2.} Delaware, USA	_{3.} 04-3438284
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4.	
(Date first transacted busi (See sections 605.0904 & 60	iness in Florida, if prior to registration.) 05.0905, F.S. to determine penalty liability)
_{5,} 3725 Leafy Way	T _A co →
Miami, FL 33133	
•	Address of Principal Office)
_{6.} 3725 Leafy Way	SS 3
Miami, FL 33133	
	(Mailing Address)
7. The name, title or capacity and address of th	ne person(s) who has/have authority to manage are:
E. Roe Stamps, IV - Manager	
David H. Hopfenberg - Chief Fi	nancial Officer
	e, no more than 90 days old, duly authenticated by the official
	der the law of which it is organized. (A photocopy is not
must be submitted)	uage, a translation of the certificate under oath of the translator
mas of sammed)	HALL
^	O.84.44)
	re of an authorized person
(In accordance with section 605.0203, F.S., the execution of this docur am aware that any false information submitted in a document to the De	ment constitutes an affirmation under the penalties of perjury that the facts stated herein are true partment of State constitutes a third degree felony as provided for in \$ 817.155, F.S.)
David	H. Hopfenberg
	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.

If unavailable, th	e alternate to be used in th	ne state of Florida is:			
2. The name and	the Florida street address	s of the registered agent and office are:	SE:	15	
CT CORPORATION SYSTEM		CRETA LAHAS	JAN 13	42.80	
-		(Name)	ASSE ASSE	သ	i i
1200 SOUTH PINE ISLAND RD.		E 2.6	PX	1	
-	Florida Street A	ddress (P.O. Box NOT ACCEPTABLE)	STATE LORID	4: 55	
	PLANTATION	FL 33324	D.F.	ĊĦ	
•		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)

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

Delaware

DACE '

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "ATLANTIC PROPERTIES I, 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 TWELFTH DAY OF JANUARY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

15 JAN 13 PM L: 55
SECRETARY OF STATE
AND ANSSEE FLORIDA

2933009 8300

150039512

You may verify this certificate onling at corp deleware conference attracts

Jeffrey W. Bullock, Socretary of State

____ ___

DATE: 01-12-15