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Foreign Limited Liability Company PSV3, LLC

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COVER LETTER

	gistration Section vision of Corporation	g				
SUBJECT	PSV3, LLC					
		Name	of Limited	Liebility Company	•	
The enclose Existence, a	ed "Application by For and check are submitted	eign Limited Liabil I to register the abo	lity Comp ove refere	nany for Authorization enced foreign limited l	i to Tra liability	nsact Business in Florida," Certificate of company to transact business in Florida.
Please retur	n all correspondence c	oncerning this matt	ter to the	following:		
	Jan R. Ezell, Cor	porate Paralegal				
			No	me of Person		
	Alston & Bird L	L.P				
			Fir	m/Company		
	1201 West Peach	tree Street				
				Address		
	Atlanta, GA 3036	09-3424				
			City/St	ate and Zip Code		
	sshores@pollacks					
		E-mail address: (to be used	for future annual report	notifica	tion)
For further i	information concerning	this matter, please	call:			
Ja	n R. Ezeil			at / 404 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	181-744	7
	Name of	Contact Person		Area Code		time Telephone Number
Dir Re P.0	AILING ADDRESS: vision of Corporations gistration Section D. Box 6327		Division Registrat Clifton E	_		-
Tallahassee, FL 32314			ecutive Center Circle see, FL 32301			
	is a check for the fo \$125.00 Filing Fee	ollowing amoun S130.00 Filing Centificate of S	Fcc &	S155.00 Filing Fo	ce &	S160.00 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:

_	P\$VJ, LLC
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
Imited	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must inclusability Company," "L. L.C." or "LLC.")
=	Deloware 3.
850 850	(Iurisdiction under the law of which foreign limited liability (FE) number, if applicable) company is organized)
	upon registration
TAR)	(I) at a first transacted business in Florida if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
ر لاتا	5605 Otenridge Orive, Suite 775, Atlanta, GA 10342
л С	
声 のご	(Street Address of Principal Office)
	5605 Glenridge Drive, Suite 775, Atlanta, GA 30342
35 m	
_	(Mailing Address)
	. The name, title or capacity and address of the person(s) who has/have authority to manage is/an
-	SV3 Venture, LLC, sole Member
_	503 Glenridge Drive, Suite 773, Atlanta, GA 30342
_	
	
	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by t
	aving custody of records in the jurisdiction under the law of which it is organized. (A photocopy i
N21FOL	
	dist of submitted)
ercia are law	
	owner that any false reformation submitted in a document to the Department of State constitutes a third degree follows as provided for mis 817 f.
	Steven Sharms (see atturised)
	Typed or printed name of signee
31	Signature of an authorized person accordance with section 603 020). For the execution of the document contributes an affirmation under the penalties of person accordance with section 603 020). For the execution of this document contributes an affirmation under the penalties of person that any facts an information submitted in a document to the Department of State constitutes a third degree follows as provided for in a 217 to

PSV3, LLC

By: PSV3 Venture, LLC, its solo Member

By: PSREG V3, LLC, its Managing Member

By: Pollack Shores Real Estate Group, LLC, its Manager

By: /s/ Steven Shores
Steven Shores, President

2015 FEB 20 AM 8: 31

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:			
PSV3, 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		2015 FEB	
	C T Corporation System	RETARY AHASSE	<u>-</u> 8 20	**************************************
	(Name)	SEE		₹*¥
	1200 South Pine Island Road	OF STEE.FL	₹	7 - 1 - 1
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	STATE	8: 30	
	Plantation FL 33324			
	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.

C T Corporation Sys	tem _		
By:		Busa	
	(Signature)		

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

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "PSV3, 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 NINETEENTH DAY OF FEBRUARY, A.D. 2015.

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

5694183 8300

150226222

You may verify this certificate online at corp.dulawars.gov/authver.sntml

jeffrey W. Bullock, Secretary of State

DATE: 02-19-15