Division	:31:05 From Tot 85 76303 0 0001575 of Coporations	(1/5 Page 1 of 1
	Florida Department of State Division of Corporations Electronic Filing Cover Sheet	
	Note: Please print this page and use it as a cover sheet. Type the fax audit num (shown below) on the top and bottom of all pages of the document.	ber
	(((H150000500113)))	
	Note: DO NOT hit the REFRESH/RELOAD button on your browser from this pa Doing so will generate another cover sheet.	\sim
	To: Division of Corporations Fax Number : (850)617-6383	File
	From: Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368	
	<pre>**Enter the email address for this business entity to be used for fu annual report mailings. Enter only one email address please.**</pre>	iture
~	Email Address:	
	Foreign Limited Liability Company SB Key West Owner GP VII, L.L.C.	15 FEB 26
RE-). 15 FEB 26	Certificate of Status0Certified Copy0Page Count04Estimated Charge\$125.00	AH 8: 29
	Electronic Filing Menu Corporate Filing Menu Help	
		FEB 27 200

https://efile.sunbiz.org/scripts/efilcovr.exe

2/26/2015

Т

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: SB Key West Owner GP VII. L.L.C.

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Linbility 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:

Ron J, Hoyl

Nanw of Person

SB Key West Owner GP VII, L.L.C.

Finn/Company

3953 Maple Avenue, Suite 300

Address

Dallas, TX 75219

City/State and Zip Code

rhoyl@rockpointgroup.com

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

For further information concerning this matter, please call:

Name of Contact Person		Area Code	Daytime Telephone Number
MAILING ADDRESS:	STREE	LADDRESS:	
Division of Corporations	Division	of Corporations	
Registration Section	Registra	tion Section	
P.O. Box 6327	Clifton I	Building	
Tallahassee, FL 32314	2661 Ex	ecutive Center Circle	
	Tallahassee, FL 32301		
sed is a check for the following amore	ant:		
S125.00 Filing Fee S130.00 Filin	ne Fee &	S155.00 Filing Fee	& 🛛 🖾 \$160.00 Filing Fee, Certificate

of Status & Certified Copy

Certificate of Status Certified Copy

2/26/2015 12:31:05 From: To: 8506176383

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:

1. SB Key West Owner GP VII, L.L.C. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC.")

2. Delaware (Jurisdiction under the law of which foreign limited hability company is organized) 3. 47-3233594 (FEI number, if applicable)

_ _

(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 3953 Maple Avenue, Suite 300

Dallas, TX 75219

4

(Street Address of Principal Office)

6. 3953 Maple Avenue, Suite 300

Dallas, TX 75219

(Mailing Address)	. á		
7. The name, title or capacity and address of the person(s) who has/have authority to manage	islare,	15 F	
Ron J. Hoyl, Vice President and Secretary	NE.	-	#4.4
3953 Maple Avenue, Suite 300	IESS AW	25	t ninkau ku Kulistauru Ku
Dallas, TX 75219		ЧН S	iner and
	0	<u></u>	

8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjary that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of Stote constitutes a third degree felony as provided for in a.817.155, F.S.)

Margaret K. Bearings Typed or printed name of signee

2/26/2015 12:31:05 From: To: 8506176383

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:

SB Key West Owner GP VII, L.L.C.

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:

	C T Corporation System				
		(Name)			
	1200 South Pine Island R	oad	≥ ∽	A	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)			ů.	
				E.	
	Plantation	FL 33324		N	TUNE.
		City/State/Zip		σ	Serie 1
			Sales.	AM	
Having been	named as registered agen	t and to accept service of process for the	e above stated timite	άœ	
liability com	pany at the place designate	ed in this certificate, I hereby accept the	appointment as >	\sim	~ 4 44

liability company at the place designated in this certificate, I hereby accept the appointment of series 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.

By:	C T Corporation System		%		
(Signature)					

Mike Jones - Asst. Secy.

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

2/26/2015 12:31:05 From: To: 8506176383

Delaware PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SB KEY WEST OWNER GP VII, L.L.C." 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-SIXTH DAY OF FEBRUARY, A.D. 2015.

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

58 26 ထ



W. Bulloci AUTHENT C TION: 2151978

DATE: 02-26-15

5661661 8300

150270154 You may vorify this certificate online at corp.dolaware.gov/authvor.shtml 1