

M500002347

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

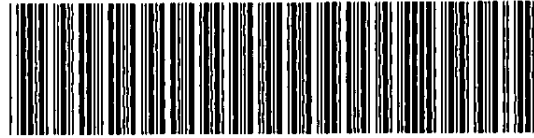
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03/31/15--01004--014 \*\*160.00

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DIVISION OF CONSULAR AFFAIRS  
15 MAR 30 PM 4:53  
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SUFFICIENCY OF FILING

S. YOUNG  
MAR 31 2015

FILED  
15 MAR 30 PM 11:30  
SECRETARY OF STATE  
DIVISION OF CONSULAR AFFAIRS

CORPDIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173

**FILING COVER SHEET**  
**ACCT. #FCA-23**

**CONTACT:** Kim Weidenbach

**DATE:** 03/30/15

**REF. #:** 9490318

**CORP. NAME:** INSITE MARATHON KEY, LLC

- ☐ ARTICLES OF INCORPORATION      ☐ ARTICLES OF AMENDMENT      ☐ ARTICLES OF DISSOLUTION  
☐ ANNUAL REPORT      ☐ TRADEMARK/SERVICE MARK      ☐ FICTITIOUS NAME  
☒ FOREIGN QUALIFICATION      ☐ LIMITED PARTNERSHIP      ☐ LIMITED LIABILITY  
☐ REINSTATEMENT      ☐ MERGER      ☐ WITHDRAWAL  
☐ CERTIFICATE OF CANCELLATION  
☐ OTHER:

STATE FEES PREPAID WITH CHECK# 70057845 FOR \$ 160.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

\_\_\_\_\_ COST LIMIT: \$ \_\_\_\_\_

**PLEASE RETURN:**

- ☒ CERTIFIED COPY      ☒ CERTIFICATE OF GOOD STANDING      ☐ PLAIN STAMPED COPY  
☐ CERTIFICATE OF STATUS

Examiner's Initials

FILED  
15 MAR 30 AM 11:30  
TALLAHASSEE, FL  
CLERK OF CIRCUIT COURT

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A  
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. INSITE MARATHON KEY LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," 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 liability company is organized)

3. Applied For

(FEI number, if applicable)

4. Upon Filing

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

5. 1825 Main Street, Suite 235, Weston, Florida 33326

(Street Address of Principal Office)

6. 1825 Main Street, Suite 235, Weston, Florida 33326

(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Insite Marathon Key Venture, LLC - Member - 1825 Main Street, Suite 235, Weston, Florida 33326

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 perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in § 817.155, F.S.)

Ben Smith

Typed or printed name of signer

FILED  
15 MAR 30 AM 11:30  
CLERK OF THE STATE  
DEPARTMENT OF STATE

**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:

INSITE MARATHON KEY 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:

NRAI Services, Inc.

(Name)

1200 South Pine Island Road

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Plantation

33324

FL

City/State/Zip

FILED  
15 MAR 30 PM 11:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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.*

*Michele Holden, Asst Secy*

(Signature)

Michele Holden, Assistant Secretary

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

# Delaware

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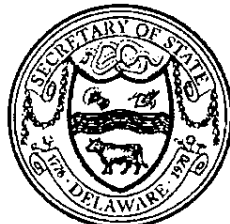
*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INSITE MARATHON KEY 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-SEVENTH DAY OF MARCH, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INSITE MARATHON KEY LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF MARCH, A.D. 2015.

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

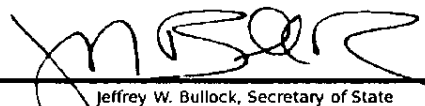
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15 MAR 30 24 11:30  
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DOVER, DELAWARE



5719184 8300

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You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 2244658

DATE: 03-27-15