Division of Corporations

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Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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From:

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Fire it the email address for this business entity to be used for annual report mailings. Enter only one email address please at a

Email Address: gspeer@kitsonpartners.com

Foreign Limited Liability Company KE BAY PINES OP4, LLC

Certificate of Status	0
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Page Count	03
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	ON 605 0902, FLORIDA STATUTES, THE FOLLOWING IS SUBM COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIL	
KE BAY PINES OP4, LL		<i>(</i> 1.
	d Linbitty Company; must include "Limited Liability Company," "L.L.C." or	"LLC.")
(If name unavailable, enter autrnate na Liability Company," "L.L.C," or "LLC	and adopted for the purpose of transacting dusiness in Florida. The alternate na	me must include "Limited
2. Delaware	3.	
(Jurisdiction under the law of which	foreign limited liability (FEI number, if applica	ble)
4,		<u>ૄ</u>
((See	Date first transacted business in Florida, if prior to registration) sections 605.0904 & 605.0905, I'S. to determine penalty liability)	
4500 PGA Boulevard, S	Suite 400, Palm Beach Gardens, Florida 33418	
F1 ,		50 70
	(Street Address of Pringues) Office)	
4500 PGA Boulevard, Suite 400, Palm Beach Gardens, Florida, 33418		APP APP APP
6. 4000 r GA Estatevale, c		
	(Malling Address)	
7. The name, title or capacit	y and address of the person(s) who has/have authority to ma	mage is/are:
Kitson & Partners Commercia	al, LLC, Member - 4500 PGA Blvd, Suite 400, Palm Beach	Gardens, FL 33418
	<u> </u>	
8. Attached is an original cert	tificate of existence, no more than 90 days old, duly authent	icated by the official
having custody of records in	the jurisdiction under the law of which it is organized. (A ps in a foreign language, a translation of the certificate under	hotocopy is not onth of the translator
	y W. Kitson/ CEO of Kitson & Partners Commercial, LLC, Memb	
C)dire	Dett	
(In accordance with section 605-0203, F.S. am aware that any false information submit	Signature of an authorized person the execution of this document constitutes an affirmation under the possities of perjury tied in a document to the Department of State constitutes a third degree (clony as provided in a document to the Department of State constitutes a third degree (clony as provided in a document to the Department of State constitutes a third degree (clony as provided in a document to the Department of State constitutes a third degree (clony as provided in a document to the Department of State Constitutes as the Department of State Constitutes and the Department of State Constitut	that the facts stated herein are true of for its \$ \$17 (55, F.S.)
•	Sydney W. Kitson	
	Typed or printed name of signee	-

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7.4...

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.01 13 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.

	of the Limited Liability Company is: NES OP4, 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:			
	George Speer	कि _{लि} ा अक्षा ≫		
	(Name)	APR J		
	4500 PGA Boulevard, Suite 400,			
	Florida Street Address (P.O. Box NOT ACCEPTABLE)			
	Palm Beach Gardens 81 33418	E co		
	City/State/Zip			
liabllity comp registered ag statutes relati	named as registered agent and to accept service of process for the above cany at the place designated in this certificate, I hereby accept the appoint and agree to act in this capacity. I further agree to comply with the ing to the proper and complete performance of my duties, and I am familigations of my position as registered agent as provided for in Chapter (Signature) (Signature) George Speer, as Registered Agent	intment as provisions of all iliar with and		
	\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)			

\$ 5.00 Certificate of Status (optional)

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RE BAY PINES OP4, 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 FOURTEENTH DAY OF APRIL, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "KE BAY PINES OP4, LLC" WAS FORMED ON THE THIRTEENTH DAY OF APRIL, A.D.; 2015.

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

5727943 8300

150505007

AUTHENTACATION:

DATE: 04-14-15

You may verify this curtificate online at corp dolaware.gov/authver.shtml