M15000003683

(Req	uestor's Name)	
bbA)	ress)	
(Add	ress)	
(City)	/State/Zip/Phone	e #)
PICK-UP	MAIT WAIT	MAIL
(Busi	iness Entity Nan	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	

Office Use Only



300272592303

05/06/15--01028--006 **125.00

MILMAY OF STAFF

MAY 1.3 2015 J. CRUCE

COVER LETTER

	gistration Section vision of Corporations	
CUDICCT.	PBRT Orlando, Ll	_C
SUBJECT:		of Limited Liability Company
The enclosed Existence, an	d "Application by Foreign Limited Liabi nd check are submitted to register the ab	lity Company for Authorization to Transact Business in Florida," Certificate of ove referenced foreign limited liability company to transact business in Florida
Please return	n all correspondence concerning this mat	ter to the following:
	Tin Kin Lee	
		Name of Person
	Law Offices of T	in Kin Lee
		Firm/Company
	1811 Fair Oaks	Ave.
		Address
	South Pasadena	a, CA 91030
		City/State and Zip Code
	tlee@tinkinlee.co	om
	E-mail address: ((to be used for future annual report notification)
For further i	nformation concerning this matter, please	e call:
Т	in Kin Lee	at (Area Code) 229-9828
	Name of Contact Person	Area Code Daytime Telephone Number
Div Reg P.C	AILING ADDRESS: vision of Corporations gistration Section D. Box 6327 lahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
	is a check for the following amoun \$125.00 Filing Fee \$\square\$ \$130.00 Filing Certificate of \$\square\$	Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate

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:

PBRT Orlando, LLC	
(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 natically Company," "L.L.C," or "LLC,")	me must include "Limited
_{2.} Delaware 3.	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicat company is organized)	ole)
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
Four Embarcadero Center, Suite 3700	
San Francisco, CA 94111	
(Street Address of Principal Office)	
5. Four Embarcadero Center, Suite 3700	
San Francisco, CA 94111	
(Mailing Address)	.
7. The name, title or capacity and address of the person(s) who has/have authority to ma	nage is/are:
Craig Tagawa; Manager	
Four Embarcadero Center, Suite 3700	
San Francisco, CA 94111	mix on F
3. Attached is an original certificate of existence, no more than 90 days old, duly authenticating custody of records in the jurisdiction under the law of which it is organized. (A phaceeptable. If the certificate is in a foreign language, a translation of the certificate under constituted) 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 the	otopopy is bot oath of the translator
m aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided	for in s.817.155, F.S.)
Craig Tagawa	-
Typed or 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.

1. The name of the Limited Liability Com PBRT Orlando, LLC	npany is:	
If unavailable, the alternate to be used in t	he state of Florida is:	
2. The name and the Florida street addres	s of the registered agent and office ar	e;
Paracorp Incor	rporated	
	(Name)	
155 Office Plaz	za Drive, 1st Floor	ACCEPTANCE TO THE PROPERTY OF
Florida Street A	ddress (P.O. Box NOT ACCEPTABLE)	SSS 4
Tallahassee	FL 32301	
	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.

Strawn Code, Assistant Secretary (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

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PBRT ORLANDO, 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-THIRD DAY OF APRIL, A.D. 2015.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PBRT ORLANDO, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF APRIL, A.D. 2015.

5734308 8300

150558330

AUTHENTYCATION: 2318029

DATE: 04-23-15

You may verify this certificate online at corp.delaware.gov/authver.shtml