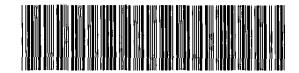
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(Re	equestor's Name)	
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<u></u>	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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CT Corporation

515 East Park Avenue Tallahassee, FL 32301 850 558 1930 tel 855 637 1628 fax www.ctcorporation.com

June 5, 2015

Secretary of State, Florida 2661 Executive Circle Center Tallahassee FL 32301

Re:

Order #: 9576909 SO

Customer Reference 1: Sunent Customer Reference 2: insura

Dear Secretary of State, Florida:

Please obtain the following:

Sun TRS Indian Creek FL LLC (MI) Registration Florida

Sun TRS Indian Creek FL LLC (MI) Cert Copy of Application for Authority-Foreign Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092.

Thank you very much for your help.

Sincerely,

Connie R Bryan Senior Fulfillment Specialist Connie.Bryan@wolterskluwer.com

COVER LETTER

TO;

Registration Section

SUBJECT: Sun TRS Siesta Bay	Name of Lim	lted Liability Company		
The enclosed "Application by Fore Existence, and check are submitted				
Please return all correspondence co	oncerning this matter to th	ne following:		
Susan R. McMas	ter			_
 		Name of Person		
Jaffe Raitt Heuer	& Weiss PC			_
	1	Firm/Company		
27777 Franklin R	oad, Suite 2500		····	
		Address		
Southfield, MI		State and ZIp Code		_
	·	State and Zip Code		
smcmaster@jaffel	ew.com E-mail address: (to be use	ed for future annual repor	1 notification)	
or further information concerning	this matter, please call:			
Susan R. McMaster		at (248)	727-1485 Daytime Telephone Number	
Name of 0	Contact Person	Area Code	Daytime Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327	Divisio Registr	ET ADDRESS: on of Corporations ation Section Building		
Tallahassee, FL 32314		xecutive Center Circle ssee, FL 32301		
nclosed is a check for the fol	lowing amount: 3 \$130,00 Filing Fee & Certificate of Status	☐ \$155.00 Filing For Certified Copy	ee & \$\Bigsiz \$160.00 Filing Fee, of Status & Certifie	

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:

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Fluiability Company," "L.L.C," or "LLC,")	orida. The alternate name must include "Limited
2. Michigan (Jurisdiction under the law of which foreign limited liability company is organized) 3. N/A (Jurisdiction under the law of which foreign limited liability	El number, if applicable)
4. Upon Filing	
(Date first transacted business in Florida, if prior to regist (See sections 605.0904 & 605.0905, F.S. to determine penalty	ation.) y liability)
5, 27777 Franklin Road, Sulte 200, Southfield, MI 48034	
	产品 5
(Street Address of Principal Office)	
5, 27777 Franklin Road, Suite 200, Southfield, MI 48034	
	Hat .
·	
, , , , , , , , , , , , , , , , , , ,	e authority to manage is/are.
7. The name, title or capacity and address of the person(s) who has/have	ு ப
7. The name, title or capacity and address of the person(s) who has/have	ு ப
(Malling Address) 7. The name, title or capacity and address of the person(s) who has/have John B. McLaren, Manager, 27777 Franklin Road, Suite 200, Southfield, MI 48034 8. Attached is an original certificate of existence, no more than 90 days of avoing custody of records in the jurisdiction under the law of which it is acceptable. If the certificate is in a foreign language, a translation of the conust be submitted)	e authority to manage is/are.
7. The name, title or capacity and address of the person(s) who has/have John B. McLaren, Manager, 27777 Franklin Road, Suite 200, Southfield, MI 48034 2. Attached is an original certificate of existence, no more than 90 days of aving custody of records in the jurisdiction under the law of which it is acceptable. If the certificate is in a foreign language, a translation of the company of the	e authority to manage is/are.
7. The name, title or capacity and address of the person(s) who has/have John B. McLaren, Manager, 27777 Franklin Road, Suite 200, Southfield, MI 48034 3. Attached is an original certificate of existence, no more than 90 days of aving custody of records in the jurisdiction under the law of which it is exceptable. If the certificate is in a foreign language, a translation of the country be submitted) Signature of an authorized person accordance with section 605,0203, F.S., the execution of this document constitutes an affirmation under the contract of	e authority to manage is/are. Id, duly authenticated by the official organized. (A photocopy is not ertificate under oath of the translator
7. The name, title or capacity and address of the person(s) who has/have John B. McLaren, Manager, 27777 Franklin Road, Suite 200, Southfield, MI 48034 3. Attached is an original certificate of existence, no more than 90 days of aving custody of records in the jurisdiction under the law of which it is acceptable. If the certificate is in a foreign language, a translation of the conust be submitted)	e authority to manage is/are. Id, duly authenticated by the official organized. (A photocopy is not ertificate under oath of the translator ere penalties of perjury that the facts stated herein are true egree felony as provided for in s.817.155, F.S.)

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 Sun TRS Siesta B	f the Limited Liabili ay LLC	ty Company is:	
If unavailable, t	he alternate to be us	sed in the state of Florida is:	
2. The name an	nd the Florida street	address of the registered agent and office are:	
	NRAI Services, Inc.		
		(Name)	
	1200 South Pine Island	d Road	15 JUJ
	Fiorida Street Address (P.O. Box NOT ACCEPTABLE)		15
	Plantation	FL 33324	- H 9:
		City/State/Zip	9:50

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.

\$ 100.00

NRAI Services, By:

Filing Fee for Application \$ 25.00 Designation of Registered Agent

Certified Copy (optional) 30.00

5.00 Certificate of Status (optional)

Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

SUN TRS SIESTA BAY LLC

was validly organized on May 20, 2015 as a Limited Liability Company. Said Limited
Liability Company is validly in existence under the laws of this state and has satisfied its annual filling obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company Is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission E6502J In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 20th day of May, 2015

Alan J. Schefke, Director

Corporations, Securities & Commercial Licensing Bureau