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NAME:

3030 NORTH ROCKY POINT DRIVE, LLC

TYPE OF FILING: APPLICATION

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**AUTHORIZATION: ABBIE/PAUL HODGE** 

#### COVER LETTER

	tration Section on of Corporation	ons						
		CKY POINT DRIVE, LLC						
SUBJECT: _			Limited Liability	Company		-		
The enclosed ". Existence, and	Application by Po check are submit	oreign Limited Liability Com ed to register the above refer	pany for Authoriza renced foreign limi	ation to Tr ited liabilit	ansact Business in Florida, y company to transact busi	" Certificate of ness in Florida		
Please return al	I correspondence	concerning this matter to the	following:					
	Jeffrey B. Gra	noff						
		Ŋ	lame of Person			-		
	Parmenter Rea	alty Partners						
	Firm/Company							
	701 Brickell A	venue, Suite 2020						
			Address		***************************************	•		
	Miami, Florid	a 33131						
		City/S	State and Zip Code			•		
	jgranoff@parme	co.com						
		E-mail address: (to be use	d for future annual	report not	tification)	•		
For further info	mation concerni	ng this matter, please call:						
Jeffery	B. Granoff		305 at (	379-75				
	Name	of Contact Person	Area Code	) Day	rtime Telephone Number			
Divisio Registr P.O. Bo	ING ADDRESS n of Corporation ation Section ox 6327 assee, FL 32314			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle ee, FL 32301			
	eck for the follow 5.00 Filing Fee	ving amount: 디 \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	₩ \$160.00 Filing Fee, Co of Status & Certified Cop			

# JUN III PM 2

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

COMPANYTOTRANSACI'BU	USINESS INTHE STATE OF FLORIDA:	LOHING IS SUBMITTED TO REGISTER A FOREIC	IN LIMITED LIABILITY
	/ POINT DRIVE, LLC elgn Limited Liability Company; must include <sup>rq</sup>	Limited Liability Company," "L.L.C.," or "LLC."	)
(If name unavailable, enter a Liability Company," "L.L.C,	lternate name adopted for the purpose of transact	ting business in Florida. The atternate name must	Include "Limited
2. Delaware	2		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	- ALL
4			
5. 701 Brickell Avenue,	(Dato first transacted business in Florid (See sections 605,0904 & 605,0905, F.S. t Suite 2020	n, if prior to registration.) to determine pountly linbility)	100 E
Miami, Florida 33131			
	(Street Address of Principal Of	Nice)	INTEST 2
6, 701 Brickell Avenue, S	Sulte 2020		
Miami, Florida 33131			
	(Malling Address)		
7. Name and street address	ss of Florida registered agent: (P.O. Box N	OT acceptable)	
Name:	Capitol Corporate Services, Inc.		
Office Address;	155 Office Plaza Drive, Suite A	· · · · · · · · · · · · · · · · · · ·	
Office Address;	Tallahasses		
	(City)	, Florida 32301 (Zip code)	
this application, I hereby	gistered agent and to accept service of proc accept the appointment as registered ugent statutes relative to the proper and complete	cess for the above stated corporation at the judent and agree to act in this capacity. I further a performance of my duties, and I am familiate Gayle Windle, Assistant Secretary a signature)	agree to comply
8. The name, title or capa Parmenter REIT Fund	icity and address of the person(s) who has/h V, LLC, Member	ave authority to manage is/are:	
701 Brickell Avenue, Suit	to 2020		
Miami, Florida 33131			_
9. Attached is a certificate jurisdiction under the law o of the translator must be su	of which it is organized. (If the certificate is	y authenticated by the official having custody  (i) a foreign language, a translation of the con  (ii) a foreign language, a translation of the con  (iii) a foreign language, a translation of the con	— of records in the tificate under oath
(In accordance with section the facts stated herein are t degree felony as provided	l/ n 605.0203, F.S., the execution of this docu rue. I am aware that any false information s	ment constitutes an affirmation under the pen ubmitted in a document to the Department of	alties of perjury that State constitutes a third
	Typed or printed name		
	t Abon or brunen mine	or nitrage	

# Delaware

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "3030 NORTH ROCKY POINT DRIVE, 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 ELEVENTH DAY OF JUNE, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "3030 NORTH ROCKY POINT DRIVE, LLC" WAS FORMED ON THE SEVENTH DAY OF MAY, A.D. 2015.

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

5737633

DATE: 06-11-15

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

AUTHENTYCATION: 2456886