

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H150001506163)))



H150001506163ABCZ

	OT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.
15 JUN 18 PM L	Division of Corporations Fax Number : (850)617-6381
15 3EC TALL	Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (850)205-8842 Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company W 12TH AVE INVESTMENT, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

FILED

FILED

FILED

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

Jul 19/15

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:

1. W 12TH A	AVE INVESTMENT, LLC [Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(Name of	Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavail consent of the m Company," "L.L	able, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the wri anagers or managing members adopting the alternate name. The alternate name must include "Limited Liability .C." "LLC.")
2. Delaware	3.
(Jurisdiction u company is o	inder the law of which foreign limited liability (FBI number, if applicable)
4	
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 8600 NW	41st Street
Miami, Fi	orida 33166
<u></u> -	(Street Address of Principal Office)
8600 NW	41st Street
Miami, Flo	orida 33166
	(Mailing Address)
7 The name	dialo an anno il construction and additional office anno and and a large anno anno anno anno anno anno anno ann
/. Inc name,	title or capacity and address of the person(s) who has/have authority to manage is/are:
Michael She	aly, Manager
8600 NW 41	st Street
Miami, Florid	da 33166
n the jurisdiction ranslation of the o	original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a certificate under oath of the translator must be submitted.) Signature/offian authorized person a 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.) Michael Shealy
	Typed or printed name of signee
	1 Abec or brunes name of signee
	Constitution of the Consti

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.

i. The name of	f the Limited Liability Con	npany is:	
W 12TH AVE	INVESTMENT, LLC		
If unavailable,	the alternate to be used in t	he state of Florida is:	
2. The name a	nd the Florida street address	s of the registered agent and office are:	-
	Michael Shealy		
		(Name)	Enco L
	8800 NW 41st Street		
	Florida Street A	ddress (P.O. Box NOT ACCEPTABLE)	· 5
	Mlami	FL 33166	31**
		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.

M). Aur (s)
(Signaporo)

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

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "W 12TH AVE INVESTMENT, 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 EIGHTEENTH DAY OF JUNE, A.D. 2015.

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

5717776 8300

150941313

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

AUTHENTICATION: 2479525

DATE: 06-18-15