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COVER LETTER

TO:

Registration Section

Div	ision of Corporatio	ns						
SUBJECT:	SAVILE STF LLC							
	Name of Limited Liability Company							
					ansact Business in Florida," y company to transact busine			
Please return	all correspondence	concerning this matter to the	following:					
	Jason Goldstein	n, Esq.						
		Name of Person						
	Richards Goldstein LLP							
	Firm/Company							
	55 Miracle Mile, Suite 310							
Address Coral Gables, FL 33134								
	jgoldstein@rgatt	omeys.com						
		E-mail address: (to be used	d for future annual	report no	tification)			
For further in	nformation concerning	g this matter, please call:						
Car	la Diaz		305 at (448-22	28			
	Name (of Contact Person	Area Code	Day	rtime Telephone Number			
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 266! Executive Center Circle Tallahassee, FL 3230!		of Corporations ion Section suilding centive Center Circle				
	check for the follow 125.00 Filing Fee	ing amount: \$\Bigsim \\$130.00 \text{ Filing Fee & Certificate of Status}\$	□ \$155.00 Filing Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Ce of Status & Certified Copy			

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:

SAVILE STF LLC					
(Name of For	eign Limited Liability Company; mu	st inclu	de "Limited Lia	bility Company," "L.L.C.,"	or "LLC.")
If name unavailable, enter a Liability Company." "L.L.C.	Iternate name adopted for the purpose "or "LLC,")	e of tra	nsacting busines	ss in Florida. The alternate i	name must include "Limited
DELAWARE		3	471835512		
(Jurisdiction under the law company is organized)	of which foreign limited liability			(FEI number, if applicat	ole)
J	(Date first transacted busine	ss in F	lorida, if prior to	registration.)	
	(See sections 605.0904 & 605.	.0905, 3	F.S. to determin	e penalty liability)	
226 5th Avenue, 4th F	loor, New York, New York 1000	1		,	
	(5		1.0250		_ 20
226 5th Avenue 4th El	(Street Address of I	-	ai Office)		
220 5th Avenue, 4th Ft	oor, New York, New York 10001				
	(Mailing)	Addres	s)		2015 JUL -1 PH
None and desired	_			(م امام	The 32 1
. Name and street addres	ss of Florida registered agent: (P.	O. B0	x <u>NOT</u> accept	able)	7.5
Name:	Richards Goldstein LLP			_	F 92
Office Address:	55 Miracle Mile, Suite 310			-	
	Coral Gables			_ , Florida	
Registered agent's accep	(City)			(Zip code)	
his application, I hereby		tered a d com	gent and agre plete perform	e to act in this capacity. ance of my duties, and I	I further agree to comply
	(Regist	ered ag	ent's signature)		
3. The name, title or capa	ecity and address of the person(s)	who h	as/have author	rity to manage is/are:	
ablo Mariño, Managing 1	Member, 226 5th Avenue, 4th Flo	oor, Ne	ew York, New	York 10001	
		 .			
	of existence, no more than 90 da of which it is organized. (If the co abmitted)				
	Signature	of an a	uthorized perso	n • • • • • • • • • • • • • • • • • • •	

Pablo Mariño

degree felony as provided for in s.817.155, F.S.)

(In 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

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "SAVILE STF 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 SIXTEENTH DAY OF JUNE, A.D. 2015.

2015 JUL -1 PM 1:55

5602613 8300

150922721

AUTHENTY CATION: 2468396

DATE: 06-16-15

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