M1500007140

(Requestor's Name)						
(Address)						
· (Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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2015 SEP -8 P 4: 55
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ALL AHASSEF FLORIDA

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U



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 26, 2015

JEFFREY C. STEINERT 1000 2ND AVENUE, SUITE 2950 SEATTLE, WA 98104

SUBJECT: FF SABAL LLC Ref. Number: W15000056822

We have received your document for FF SABAL LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 615A00018049

COVER LETTER

	istration Section ision of Corporations				
SUBJECT:	FF Sabal LLC				
	Name of I	Limited Liability Company			
	"Application by Foreign Limited Liability Comp d check are submitted to register the above refere				
Please return	all correspondence concerning this matter to the	following:			
	Jeffrey C. Steinert				
Name of Person					
	Pepple Cantu Schmidt PLLC				
Firm/Company					
1000 2nd Avenue, Suite 2950					
Address					
	Seattle, WA 98104				
	2015 SEC TALL				
JSTEINERT@PCSLEGAL.COM					
	E-mail address: (to be used	for future annual report not	ification) SEP -		
For further in	formation concerning this matter, please call:		SEP -8 P		
Jeff ——	rey C. Steinert	206 625-99. _ at ()	STA #		
	Name of Contact Person	Area Code Day	time Telephone Number		
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301		
	check for the following amount: 125.00 Filing Fee \$\square\$ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Fee & Certified Copy	□ \$160.00 Filing Fee, Certificate 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 BY SINESS IN THE STATE OF FLORIDA:

FF Sabal LLC	eign Limited Liability Company; mu		allity Company " "L L C	7 22 cm +41 L C 25\	
(Name of For	eigh Limited Liability Company; mu	st include "Limited Liat	onity Company, "L.L.C	J.," or "LLC.")	
(If name unavailable, enter a Liability Company," "L.L.C,	Iternate name adopted for the purpos	e of transacting busines	s in Florida. The alterna	ite name must includ	le "Limited
2. State of Delaware	, or EBC.)	3. 91-1778234			
(Jurisdiction under the law	of which foreign limited liability	3	(FEI number, if appli	icable)	
company is organized)					
4	(Date first transacted busine (See sections 605.0904 & 605	ess in Florida, if prior to	registration.)		
5. 5403 West Gray Stree	(See sections 605.0904 & 605	.0905, F.S. to determine	e penalty liability)		
Tampa, FL 33609					
1 /	(Street Address of	Principal Office)	<u></u>		
6. 2430 Estancia Bouleva	rd, Suite 114				
Clearwater, FL 33761			1		
· · · · · · · · · · · · · · · · · · ·	(Mailing	Address)			
7. Name and street address	ss of Florida registered agent: (P	.O. Box NOT accept:	able)	2015 SEC	
Name:	Trustee and Corporate Services	_		SEP RETA	Π
Office Address:	2430 Estancia Boulevard, Suite	: 114	-	SSEE	
	Clearwater		, Florida <u>33761</u>	五 元 元 日	
	(City)		(Zip cod	16) SS = F	O
this application, I hereby	gistered agent and to accept ser accept the appointment as regis statutes relative to the proper an ition as registered agent	tered agent and agree	e to act in this capacit	ty. I further agree	to comply
8. The name, title or capa	acity and address of the person(s)	who has/have authori	ity to manage is/are		
	5403 West Gray Street, Tampa, F		ory to manage to are.		
	03 West Gray Street, Tampa, FL				
9. Attached is a certificate jurisdiction under the law of the translator must be su	D9'12	ertificate is in a foreig	n language, a translati	ving custody of reion of the certificat	cords in the te under oath
	Signature	of an authorized person			
This document is executed submitted in a document to	I in accordance with section 605.0 the Department of State constitu)203 (1) (b), Florida S ites a third degree felo	tatutes. I am aware the	at any false inform s.817.155, F.S.	ation
	J David Page, Manager				

Typed or printed name of signee

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "FF SABAL 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-FIRST DAY OF AUGUST, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FF SABAL LLC"
WAS FORMED ON THE SEVENTH DAY OF AUGUST, A.D. 2015.

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

2015 SEP -8 P 4: 55
SECRETARY OF STATE
TALLAHASSEE F. STATE

5800313 8300

151202210

AUTHENTY CATION: 2666750

DATE: 08-21-15

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