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PICK-UP WAIT MAIL			
(Business Entity Name)			
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Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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OCT -9 2015 N. CAUSSEAUX



CT Corporation

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

October 8, 2015

Department of State, Florida Clitton Building 2611 Executive Center Circle Tallahassee FL 32301

Re:

Order #: 9724440 SO

Customer Reference 1:

79624-384

Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:

Atlantic Delray Beach, LLC (FL) Conversion Florida

Atlantic Delray Beach, LLC (DE) Registration 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 contactathe undersigned immediately at (850) 222-1092.

Thank you very much for your help.

Sincerely,

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

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

	ISINESS INTHE STATE OF FLORIDA:	
1. Atlantic Deir (Name of Fore	ay Beach, LLC lign Limited Liability Company; must include "Limited Lial	bility Company," "L.L.C.," or "LLC.")
(If name unavailable, enter al Liability Company," "L.L.C,"	ternate name adopted for the purpose of transacting busines or "LLC.")	s in Florida. The alternate name must include "Limited
2. Delaware	3	(FEI number, if applicable)
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)
4	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determine	registration.)
5. 1025 Kane Concourse		· · · · · · · · · · · · · · · · · · ·
Bay Harbor, Florida 3	33154 (Street Address of Principal Office)	
6. <u>c/o Appreciation Ho</u>	ldings-Manager, LLC	
1025 Kane Concours	se #215, Bay Harbor, Florida 33154 (Mailing Address)	
7. Name and street address	s of Florida registered agent: (P.O. Box NOT accept	able)
Name:	C T Corporation System	_
Office Address:	1200 South Pine Island Road	
	Plantation	, Florida 33324 (Zip code)
Registered agent's accept		(Zip code)
Having been named as reg designated in this applicat to complywith the provision accept the obligations of a	gistered agent and to accept service of process for the tion, I hereby accept the appointment as registered a	gent and ugree to act in this capacity I further agree performance of my duties, and Fam familiar with an
	(Registered agent's signature)	Accietoot Secretaria
8. The name, title or capa	city and address of the person(s) who has/have author	ity to manage is/are:
Appreciation Holdings	s-Manager, LLC, Manager	
1025 Kane Concourse	#215, Bay Harbor, Florida 33154	
	of existence, no more than 90 days old, duly authentic of which it is organized. (If the certificate is in a foreign libmitted)	

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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 s.817.155, F.S.

Howard D. Cohen, Manager of Apppreciation Holdings-Manager, LLC

Signature of an authorized person

Typed or printed name of signee

<u>Delaware</u>

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "ATLANTIC DELRAY BEACH, 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 EIGHTH DAY OF OCTOBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



and sort delayers soviet.

5845249 8300

SR# 20150436616

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

Jeffrey W. Bullock, Secretary of State

Authentication: 10206576

Date: 10-08-15