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1333 LAS PALMAS PARTNERS, LLC

TYPE OF FILING: APPLICATION

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COVER LETTER

1714	ision of Corporation					
UBJECT:	1333 LAS PALMA	S PARTNERS, LLC				
	Name of Limited Liability Company					
The enclosed Existence, an	l "Application by For id check are submitte	reign Limited Liability Comp d to register the above refer	pany for Authorizatenced foreign limit	ion to Tre ed liability	ansact Business in Florida," Certifica y company to transact business in Fl	
lease return	all correspondence of	concerning this matter to the	following:			
	JOHN G. BUR	GEE				
		N	ame of Person			
	BURGEE & A	BRAMOFF, PC				
		F	irm/Company			
	20501 VENTU	ra boulevard, suite	262			
			Address			
	WOODLAND	HILLS, CA 91364				
	<u></u> -	City/S	tate and Zip Code			
	JBURGEE@BA	NDALAW,NET				
		E-mail address: (to be use	d for future annual	report not	tification)	
or further in	formation concernin	g this matter, please call;				
JOHN BURGEE		818 at (264-75	75		
	Name o	f Contact Person	Area Code	Day	time 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 2661 Executive Center Circle Tallahassee, FL 32301				
	check for the follow 125.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy	g Fee &	☐ \$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 BUSINESS IN THE STATE OF FLORIDA:

, 1333 LAS PALMAS P.	ARTNERS, LLC		
(Name of Fore	eign Limited Liability Company; must include "L	imited Liability Company," "L.L.C.," or "	LLC.")
(If name unavailable, enter al Liability Company," "L.L.C,"	ternate name adopted for the purpose of transacti "or "LLC.")	ng business in Florida. The alternate name	must include "Limited
2. CALIFORNIA	3. 95-	4838186	
	of which foreign limited liability	(FEI number, if applicable)	
4	(Data Cost torong stad business in Elevide	If all the second secon	
	(Date first transacted business in Florida (See sections 605.0904 & 605.0905, F.S. to	o determine penalty liability)	
5. 95 N. County Road			
Palm Beach, FL 33480			
6 95 North County Road	(Street Address of Principal Off	ice)	
Palm Beach, FL 33480			
	(Mailing Address)		
7. Name and street addres	s of Florida registered agent: (P.O. Box No.	OT acceptable)	
Name:	Stuart Grossman		
Office Address:	201 South Biscayne Boulevard. 22nd Floo	r	22
	. Miami	, Florida 33131	
	(City)	(Zip code)	
designated in this applica- to complywith the provision	tance: gistered agent and to accept service of proc tion, I hereby accept the appointment as re tions of all statutes relative to the proper and my position as registered agent. O A A A A A A	gistered agent and agree to act in this	capacity. I further agree
		phur-	
	(Registered agent's	signature)	
8. The name, title or capa	acity and address of the person(s) who has/he	ive authority to manage is/are:	
Adrianne Silver, Manager	95 North County Road, Palm I	3each, FL 33480	
Edward Leevan, Manager	11400 West Olympic Blvd., 16	th Floor, Los Angeles, CA 9006	4
9. Attached is a certificate jurisdiction under the law of the translator must be so	of existence, no more than 90 days old, duly of which it is organized. (If the ceptificate is ubmitted)	in a foreign language, a translation of	ustody of records in the the certificate under oath
This document is executed submitted in a document to	in accordance with section 605/0203 (1) (b) the Department of State constitutes a third of	, Florida Statutes. I am aware that any legree felony as provided for in s.817.	false information 155, F.S.
	John Burgee		
	Typed or printed name	of signee	

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: 1333 LAS PALMAS PARTNERS, LLC

FILE NUMBER: **FORMATION DATE:** 200100910005

01/08/2001

TYPE:

DOMESTIC LIMITED LIABILITY COMPANY

JURISDICTION: **CALIFORNIA**

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of October 21, 2015.

> ALEX PADILLA Secretary of State