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**S** MASON

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO	. :	I2000	0000195
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REFERENCE : 952750 7821525

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: January 11, 2016

ORDER TIME : 12:20 PM

ORDER NO. : 952750-005

CUSTOMER NO: 7821525

\_\_\_\_\_\_

## FOREIGN FILINGS

NAME: EW PARKLAND, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

## 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 RUSINESS IN THE STATE OF FLORIDA:

EW PARKLAND, LLC	ign Limited Liability Company; must include	"Limited Liability Company," "L.L.C	2" or "LLC.")
(V	<b>2</b>	,,,,	,, , ,
iability Company," "L.L.C,"	ternate name adopted for the purpose of transa or "LLC.")	cting business in Florida. The alterna	ite name must include "Limited
DELAWARE	٥.	1-0977091 	
(Jurisdiction under the law ( company is organized)	of which foreign limited liability	(FEI number, if appl	icable)
)	(Date first transacted business in Flori	da ifadas ta sasistentias V	
	(See sections 605.0904 & 605.0905, F.S	to determine penalty liability)	
2875 NE 191 STREET	, SUITE 800		<u></u>
AVENTURA, FLORIE	DA 33180		
2875 NE 191 STREET,	(Street Address of Principal C	Office)	
2075 NE 191 STREET,	30112 600		200
AVENTURA, FLORID	DA 33180		7
	(Mailing Address)	· · · · · · · · · · · · · · · · · · ·	
7. Name and street address	s of Florida registered agent: (P.O. Box ]	NOT acceptable)	
Name:	Juan DeAngulo		Ta > m
Office Address:	2875 NE 191 STREET, SUITE 800		STA:
	AVENTURA	, Florida	
	(City)	(Zip co	<del></del>
Registered agent's accept Having been named as rej	rance: gistered agent and to accept service of pr	ocess for the above stated limited	d liability company at the plac
	tion, I hereby accept the appointment as a ons of all statutes relative to the proper a		
o complywill the provision accept the obligations of r	ny position as registered against	na compiere perjormance oj my	unites, una 1 um jumiliar with
	(Registered agent	's signature)	
8. The name, title or capa	city and address of the person(s) who has	/have authority to manage is/are:	
Juan DeAngulo, Authoriza			
2875 NE 191 STREET, S			<u> </u>
AVENTURA, FLORIDA	33180	1	
			-
	of existence, no more than 90 days old, do of which it is organized. (If the certificate abmitted)		
	Signature of an auth	norized person	<del></del>
This document is executed submitted in a document to	in accordance with section 605.0203 (1) (a) the Department of State constitutes a thir	(b), Florida Statutes. I am aware the	hat any false information
	Juan DeAngulo	=g/, pro-riada (or iii	
	Typed or printed nar	ne of signee	

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "EW PARKLAND, 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 ELEVENTH DAY OF JANUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EW PARKLAND, LLC" WAS FORMED ON THE FOURTH DAY OF JANUARY, A.D. 2016.

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

Authentication: 201648551

Date: 01-11-16

5926326 8300 SR# 20160143326