#286 P.002/006

Page 1 of 2

### Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FLAGLER DEVELOPMENT GROUP, LLC

Account Number : I20020000144 : (305)520-2344 : (305)520-2400 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

#### Foreign Limited Liability Company FS3 Building 8 LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

APR 06 2016

Electronic Filing Menu

Corporate Filing Menu

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March 18, 2016

#### FLORIDA DEPARTMENT OF STATE

Division of Corporations

FLAGLER DEVELOPMENT GROUP, LLC

SUBJECT: FS3 BUILDING 8 LLC

REF: W16000018714

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The required electronic filing cover sheet was not submitted with the document. Please resubmit the document with the electronic filing cover sheet.

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Yasemin Y Sulker Regulatory Specialist II FAX Aud. #: H16000063633 Letter Number: 216A00005147

2416 APR -5 AM 10: 52 SHURLTARY OF PLATE ALL AHASSEE. FLORIDA

#### **COVER LETTER**

TO:	Registration Section
	Division of Corporations

SUBJECT: FS3 Building 8 LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Jessica Alvarez
Name of Person
Florida East Coast Industries, LLC
Firm/Company
2855 Le Jeune Rd., 4th Floor
Address
Coral Gables, FL 33134
City/State and Zip Code
jessica.alvarez@feci.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jessica Alvarez

<sub>ar</sub> 305

520-2366

Name of Contact Person

Area Code

Daytime 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

Enclosed is a check for the following amount:

□ \$125.00 Filing Fee

\$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 BUSINESS IN THE STATE OF FLORIDA:

1. FS3 Building 8 LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C	2.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The altern Liability Company," "L.L.C," or "LLC.")	ate name must include "Limited	
<sub>2.</sub> Delaware		
(Jurisdiction under the law of which foreign limited liability (FEI number, if a company is organized)	applicable)	
	<u> </u>	
4. (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	<u> </u>	
2855 Le Jeune Rd., 4th Floor	OAHAA	
V 1	- <del>SSN 5</del>	
Coral Gables, FL 33134		
(Street Address of Principal Office)	- C - C	
<sub>6.</sub> 2855 Le Jeune Rd., 4th Floor	<u> </u>	
Coral Gables, FL 33134		
(Mailing Address)	<u></u>	
7. The name, title or capacity and address of the person(s) who has/have authority t	o manage is/are	
	o manage is/ae,	
Vincent Signorello (P); Daniel Marcus (VP);		
Kolleen Cobb (VP, S); Juan (Rusty) Godoy (VP, T, AS)	; and	
Margarita M. Martinez (VP)		
Transparia (VI, Transmoz (VI )		
B. Attached is an original certificate of existence, no more than 90 days old, duly authaving custody of records in the jurisdiction under the law of which it is organized. acceptable. If the certificate is in a foreign language, a translation of the certificate unust be submitted)	(A photocopy is not	
47000		
Signature of an authorized person  In accordance with section 605,0203, F.S., the execution of this document constitutes an affirmation under the penalties of parameters are that any false information submitted in a document to the Department of State constitutes a third degree felony as parameters.	erjury that the facts stated herein are tru provided for in s.817.155, F.S.)	
Kolleen O.P. Cobb, Vice President		

Typed or printed name of signee

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name	of the	Limited	Liability	Company	is
----	----------	--------	---------	-----------	---------	----

## FS3 Building 8 LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Kolleen O.P. C	Cobb	Total cons
(Name)		
2855 Le Jeune	e Rd., 4th Floor	APR AREA
Florida Street Address (P.O. Box NOT ACCEPTABLE)		-5 -5
Coral Gables	FL 33134	
City/State/Zip		22 × %
		57 -

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

# Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "FS3 BUILDING 8 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 MARCH, A.D. 2016.

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

16 APR - 5 AM 8: 24
SECRETARY OF STATE
TAIL AHASSEE ELOGIE

5521645 8300 SR# 20161683621

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

Jaffrey W. IL. Sock Scorrary di State

Authentication: 201992841

Date: 03-16-16