

Florida Department of State Division of Corporations **Electronic Filing Cover Sheet**

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FLORIDA LIMITED LIABILITY CO. MAITLAND CITY CENTRE HOLDINGS, LLC

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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 1 LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	TO REGISTER A FOREIGN
, MAITLAND CITY CENTRE HOLDINGS, LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.,	," or "LLC,")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and a consent of the managers or managing members adopting the alternate name. The alternate name must inclu Company," "L.L.C." "LLC.")	ANACT BUSINESS INTHE STATE OF FLORIDA: E HOLDINGS, LLC Solidy Company; must include "Limited Liability Company," "LLC," or "LLC,") ame adopted for the purpose of transacting business in Florida and attach a copy of the written members adopting the alternate name. The alternate name must include "Limited Liability 3. (FEI number, if applicable) It transacted business in Florida, if prior to registration.) In 605.0904 & 605.0905, F.S. to determine penalty liability) (Street Address of Frincipal Office) (Mailing Address) In Mailing Address) In order Member (Mailing Address) In order Member Existence, no more than 90 days old, duly authenticated by the official having custody of records the it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a of the translator must be submitted.) Signature of an authorized person ion 605.0203, F.S. the execution of this document constitutes an affirmation under the time facts stated herein are true. I am aware that any false information submitted in a
2. Delaware 3	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicabe company is organized)	ole)
4	The Profit
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. 121 Aihambra Plaza 1600	% X → X
Coral Gables, FL 33134	
(Street Address of Principal Office)	rii o
6. 121 Alhambra Plaza 1600	<u> </u>
Coral Gables, FL 33134	Dr. .
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to me	anage is/are:
AMRES Maitland, LLC, Authorized Member	
121 Alhambra Plaza 1600	
Coral Gables, FL 33134	
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in translation of the certificate under oath of the translator must be submitted.)	naving custody of records a foreign language, a
the Life	_
(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation penalties of perjury that the facts stated herein are true. I am aware that any false information a document to the Department of State constitutes a third degree follony as provided for in a	ubmitted in a
	
Typed or printed name of signed	

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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	f the Limited Liability Co	ompany is:	
MAITLAND C	CITY CENTRE HOLDIN	NGS, LLC	
If unavailable,	the alternate to be used la	n the state of Florida is:	
2. The name at		ess of the registered agent and office are:	20 IN
	R. Larry Rentz	(Alama)	
	·	(Nante)	AX H
	121 Alhambra Plaza	Suite 1600	333 77 9
Florida Street Address (P.C. Box NOT ACCEPTABLE)		ר ביי ד	
			STATE STATE LORIDA
	Coral Gables	_{FL} 33134	
		City/State/Zip	

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.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

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Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "MAITLAND CITY CENTRE HOLDINGS, 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 FIFTH DAY OF APRIL, A.D. 2016.

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

6002774 8300

SR# 20162082028

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

Justiney W. Estimatile, Superatively of Stude 3

Authentication: 202095607

Date: 04-05-16