

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H160000943673)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850)205-8842

Fax Number

: (850)878-5368

**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 Miami Cruise Terminal A LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

BJECT:	Miami Cruise Terminal A LLC		
	Name of L	mited Liability Company	•
		ny for Authorization to Transact Business in Florida,' ced foreign limited lishility company to transact busin	
ease retur	all correspondence concerning this matter to the fo	llowing:	
	Jon Jaffe, Esq.		
	Nau	ne of Person	-
	Miami Cruise Terminal A LLC		
	Fin	/Company	
	1050 Caribbean Way		
		Address	•
	Miami, FL 33132		
	City/Sta	e and Zip Code	-
	jjaffe@rccl.com		
	E-mail address; (to be used	or future annual report notification)	
further in	formation concerning this matter, please call:		
Jon	Jaffe	305 539-6767	
***************************************	Name of Contact Person	Area Code Daytime Telephone Number	•
Divi Reg P.O	ILING ADDRESS: sion of Corporations istration Section Box 6327 ahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
		☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Ce Certified Copy of Status & Certified Cop	

4/15/2016 12:07:46 PM From: To: 8506176383(3/4)

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 RECEISER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	neign trimited t	monny C	ompany; must inche	le "Limited	Liability Con	npany,'' "L.L.C.,"	or "LLC,")		
(If name unavailable, enter Liability Company," "L.L.(alternete name	edopted fo	r the purpose of tran	santing bu	siness in Florid	da. The alternate :	name must inc	slude "Li	imited
, Delaware	·		2						
(Jurisdiction under the lar company is organized)	waf which fore	ign limited	liability 3.		(FEI n	umber, if applicat	ole)	<u></u>	
4	/l)ata	first trace	and Business & Ele				~		
		tions 605.	octed business in Flo 0904 & 605.0903, F	.S. to deter	mine penulty l	iability)			
5. 1050 Caribbean Way	,								
Miami, Florida 33132	2								
			Address of Principal	Office)					
5. 1050 Caribbean Way,	ATTN: Legal	Dept.		.,,				o n	
Miami, Florida 33132	!						<u></u>	<u> </u>	- J. 4
			(Mailing Address)					 آٽ	e person Light
7. Name and street addre	ess of Florida r	egistered	agent: (P.O. Box	NOT acc	ceptable)		**************************************		? ***9 **1
Name:	Bradley H.	Stein					77 (A)		The Carrier of the Ca
Office Address:	1050 Caribl	bean Way					95	ဂၤ ထဲ	lungani si T
33307732-3021	Miami	····				33132 (Zip code)	15 F	δ,	
					, Florida	(Zin code)	- A		
Registered agent's accep	ptance:		(City)			(my today			
Having been named as re lesignated in this applica o complywith the provisi	egistered agen ation, I hereby lons of all stat	accept ti utes relat	accept service of p he appointment as live to the proper t	rocess foi registere	the above s	tated limited lia agree to act in t	his capacity	. I furt	her agr
Having been named as re lesignated in this applica o complywith the provisi	egistered agen ation, I hereby lons of all stat	accept ti utes relat	accept service of p he appointment as live to the proper t	rocess for registere	the above s d agent and lete perform	tated limited lia agree to act in t	his capacity	. I furt	her agre
Having been named as relessionated in this applicate or complywith the provision complywith the provision of the state of	egistered agen ation, I hereby lons of all stat my position a:	accept the	accept service of p he appointment as live to the proper ed agent (Registered ager	rocess for registere and comp	the above sold agent and liste performation	tated limited lia agree to act in i ance of my duti	his capacity	. I furt	her agre
laving been named as relesignated in this applicate to complywith the provision of the obligations of the obligations. The name, title or capa	egistered agen ation, I hereby ions of all stat my position a:	accept the present of	(Registered ager person(s) who has	rocess for registere and composition of the composi	the above sold agent and lete performance	tated limited lia agree to act in i ance of my duti	this capacity es, and I am	. I furt	her agre
laving been named as relesignated in this applicate complywith the provision of the obligations of the obligations. The name, title or capadam M. Goldstein Ma	egistered agen ation, I hereby ions of all stat my position a: acity and addr anager -	ess of the	(Registered ager person(s) who has	rocess for registere and composite signatures/have aut.	the above sold agent and lete performance of the hority to man Miami,	tated limited lia agree to act in a ance of my duti	this capacity es, and I am 33132	. I furt	her agr
Having been named as relesignated in this applicate to complywith the provision of the complywith the complete	egistered agen ation, I hereby ions of all stat my position a: acity and addr anager -	ess of the	(Rogistered ager person(s) who has Caribbean	rocess for registere and computer signature state authors way,	the above so dagent and lete performance) hority to man Miami,	nated limited lia agree to act in a ance of my duti mage is/are: Florida Florida	skis capacity es, and I am 33132 33132	. I furt	her agr
Having been named as relesignated in this applicate to complywith the provision of the complywith the complete	egistered agenation, I hereby ions of all statemy position as acity and addranager - nager - of existence, of which it is	ess of the 1050 1050 no more t	(Registered ager person(s) who has Caribbean Caribbean Caribbean	rocess for registere and compositive signature such a Way, Way, Way,	the above so dagent and lete performance hority to man Miami, Miami, miami,	nated limited lia agree to act in a ance of my duti mage is/are: Florida Florida Florida e official having	33132 33132 33132	. I furth	her agrical with a
Having been named as relesignated in this applicate to complywith the provision of the complywith the c	egistered agenation, I hereby ions of all statemy position as acity and addranager - nager - of existence, of which it is	ess of the 1050 1050 no more to organized	(Registered ager person(s) who has Caribbean Caribbean han 90 days old, de. (If the certificate	way, Way, Way,	hority to man Miami, Miami, micated by the	nated limited lia agree to act in a ance of my duti mage is/are: Florida Florida Florida e official having	33132 33132 33132	. I furth	her agrical with a
Having been named as relesignated in this applicate to complywith the provision of the obligations of the obligation of the obligation of the obligation of the obligation obligations obligati	egistered agenation, I hereby ions of all statemy position as acity and addranager - nager - of existence, of which it is	ess of the 1050 1050 no more to organized	(Registered ager person(s) who has Caribbean Caribbean Caribbean han 90 days old, d.	way, Way, Way,	hority to man Miami, Miami, micated by the	nated limited lia agree to act in a ance of my duti mage is/are: Florida Florida Florida e official having	33132 33132 33132	. I furth	her agrical with a
Having been named as relesignated in this applicate to complywith the provision of the complywith the c	egistered agen adon, I hereby lons of all stat my position a acity and addr anager - nager - of existence, so of which it is a ubmitted)	ess of the 1050 1050 no more to organized	(Registered ager person(s) who has Caribbean Caribbean Caribbean Caribbean Signature of an autition 605.0203 (1)	way, Way, Way, Way, Way, Way, Way, Way, W	hority to man Miami, Mi	tated limited lia agree to act in tance of my duti mage is/are: Florida Florida Florida e official having	33132 33132 33132 g custody of of the certification	records	her agrical with a

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "MIAMI CRUISE TERMINAL A 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 FOURTEENTH DAY OF APRIL, A.D. 2016.

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

5922538 8300

SR# 20162304071

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

JOHING W Bullings, Secretary of Sisis

Authentication: 202150356

Date: 04-14-16