

4/25/2016 9:54:13 AM From: To: 8 06172 83( 1 )

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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6303

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000C00023  
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  
CIP 2014 Tampa Tenant LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

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FLORIDA  
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2016 APR 25 AM 10:31

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4/25/2016 9:54:13 AM From: To: 8306176383( 2/5 )

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: CIP 2014 TAMPA TENANT 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:

Joanne M. Dardano, Paralegal

Name of Person

c/o Goulston & Storrs PC

Firm/Company

400 Atlantic Avenue

Address

Boston, MA 02110-3333

City/State and Zip Code

jdardano@goulstonstorrs.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joanne Dardano

617

574-6431

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

4/25/2016 9:54:13 AM From: To: 8506176383( 3/5 )

**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. CIP 2014 TAMPA TENANT 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. The alternate name must include "Limited  
Liability Company," "L.L.C.," or "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability  
company is organized)

3. \_\_\_\_\_

(FEI number, if applicable)

4. Not applicable.

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. One Boston Place, Suite 2310

Boston, MA 02108

(Street Address of Principal Office)

6. One Boston Place, Suite 2310

Boston, MA 02108

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

Florida 33324

(Zip code)

Registered agent's acceptance:

*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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and  
accept the obligations of my position as registered agent.*

By: C T Corporation System Carrie Bayan

(Registered agent's signature)

Regi

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

CIP 2014 Tampa Hotel LLC, sole Member, One Boston Place, Suite 2310, Boston, MA 02108

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the  
jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath  
of the translator must be submitted)

**SEE ATTACHED SIGNATURE PAGE**

Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information  
submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Patrick O'Sullivan

Typed or printed name of signer

4/23/2016 9:54:13 AM From: To: 8506176383( 4/5 )

**CIP 2014 Tampa Tenant LLC,**  
a Delaware limited liability company

By: **CIP 2014 Tampa Hotel LLC,**  
a Delaware limited liability company,  
its sole Member

By: **CIP 2014 Equity REIT LLC,**  
a Delaware limited liability company,  
its sole Member

By: **CrossHarbor Institutional Partners 2014 GP, L.P.,**  
a Delaware limited partnership, its Manager

By: **CrossHarbor Capital Partners LLC,**  
a Delaware limited liability company,  
its General Partner

By:   
Name: Patrick O'Sullivan  
Title: Chief Financial Officer

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APR 25 AM 31  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CIP 2014 TAMPA TENANT 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 TWENTY-FIRST DAY OF APRIL, A.D. 2016.

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



6022316 8300

SR# 20162469718

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202190356

Date: 04-21-16