

Division of Corporations

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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : JAM MARK LIMITED  
Account Number : 120000000112  
Phone : (305) 789-7758  
Fax Number : (305) 789-7799

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Email Address: \_\_\_\_\_

**Foreign Limited Liability Company  
Caribbean Holdings GP, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

TALLAHASSEE, FLORIDA

2016 MAY -4 PM 4:57

TALLAHASSEE, FLORIDA

2016 MAY -4 A 8:55

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MAY 05 2016  
J. BRUCE

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

1. Caribbean Holdings GP, LLC  
(Name of Foreign Limited Liability Company; 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. N/A  
(FEI number, if applicable)
4. Upon qualification  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 701 Brickell Avenue, Suite 3300, Miami, FL 33131  
(Street Address of Principal Office)
6. 701 Brickell Avenue, Suite 3300, Miami, FL 33131  
(Mailing Address)
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  
 Name: Corporation Service Company  
 Office Address: 1201 Hays Street  
Tallahassee, Florida 32301  
 (City) (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.*

*Doreen S. Haeselin Asst. V.P.*

(Registered agent's signature)

**Doreen S. Haeselin, Asst. V.P.**

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

<u>Arturo Zizold - Authorized Person</u>	<u>Claudia Fontecilla - Authorized Person</u>
<u>701 Brickell Avenue, Suite 3300</u>	<u>701 Brickell Avenue, Suite 3300</u>
<u>Miami, FL 33131</u>	<u>Miami, FL 33131</u>

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)

*Patrick C. Emans*  
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 C. Emans

Typed or printed name of signer

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16 MAY - 11 A 8:55  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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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 "CARIBBEAN HOLDINGS GP, 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 FOURTH DAY OF MAY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CARIBBEAN HOLDINGS GP, LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF APRIL, A.D. 2016.

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



6029279 8300

SR# 20162836834

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202261167

Date: 05-04-16

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