Electronic Filing Cover Sheet Note: Please print this page and use it as a cover sheet. Type the fax audit number (sho below) on the top and bottom of all pages of the document.)wn				
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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					
<pre>**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address:</pre>					
Foreign Limited Liability Company 4800 West Shore Apartments, LLC					

MAY 1 3 2016

SVIBARSEN

} | 5/12/2016 11:37:47 AM From: To: 8506176383(2/4)

COVER LETTER

TO: Registration Section Division of Corporations

4800 West Shore Apartments, LLC

SUBJECT:

.

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:

Cheric Slade-Carlock

Name of Person

The Dinerstein Companies

Firm/Company

3411 Richmond Ave Ste 200

Address

Houston Texas 77046

City/State and Zip Code

cherie.slade-carlock@tdc-properties.com

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

For further information concerning this matter, please call:

Tom Caltagirone		832 at ()	209-1200			
Name	of Contact Person	Area Codu	Daytime Telephone Number			
MAILING ADDRESS	1	S	<u>l'REET ADDRESS:</u>			
Division of Corporation	8	Division of Corporations				
Registration Section		R	Registration Section			
P.O. Box 6327		Clifton Building				
Tallahassee, FL 32314		2661 Executive Center Circle				
		Tallahassee, FL 32301				
Enclosed is a check for the follow	ving amount:					
□ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155,00 Filing F Certifled Copy	ee & 🖄 \$160.00 Filing Fee, Certificate of Status & Certified Copy			

Defermere

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:

4800 West Shore Apartments, 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.		when ea tot		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI num	ber, if applicable)	
4. 05/12/2016				
	(Date first transacted business in i (See sections 605,0904 & 605,0905,	Florida, if prior to registration. F.S. to determine penalty liab) illity)	
5. 3411 Richmond Ave S		· · ·		
Houston Texas 77046				and the state of the
	(Street Address of Princip	pal Office)	- 74 - 55 - 14 - 55	14
5. 3411 Richmond Ave St	411 Richmond Ave Ste 200			
Houston Texas 77046			AT 12	m
	(Malling Addre	ss)		
. Name and street addres	as of Florida registered agent: (P.O. Be	ox <u>NOT</u> acceptable)	LOP ISTA	
Name:	NRAI Scrvices, Inc.		ORIDA	ā
Office Address:	1200 South Pine Island Road		×.	
	Plantation	, Plorida	33324	
	(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.

Registered agent. NRAI Services, Information Bused (Registered agent's signature) Regi By:

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

TDC Fund I, L.P. - Sole Member

Attention: Tom Caltagirone, Chief Operating Officer

3411 Richmond Ave Ste 200 Houston Texas 77046

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. Hethe certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

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.

Tom Caltagirone, Chief Operating Officer

Typed or printed name of signee

5/12/2016 11:37:47 AM From: To: 8506176383(4/4)

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "4800 WEST SHORE APARTMENTS, 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 TWELFTH DAY OF MAY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "4800 WEST SHORE APARTMENTS, LLC" WAS FORMED ON THE ELEVENTH DAY OF MAY, A.D. 2016.



Authentication: 202305885 Date: 05-12-16

6039698 8300 SR# 20163116615 You may verify this certificate online at corp.delaware.gov/authver.shtml