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SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

SUNSHINECORPORATE2014@GMAIL.COM

Date: $6/8/16$
ENTITY NAME:
940 Court Street Clearwater, LLC
PLEASE FILE THE ATTACHED AND RETURN:
Plain Copy
Certified Copy
PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY: Document Number:
Certified Copy of Arts & Amendments
Certificate of Good Standing
APOSTILLE'/NOTARIAL CERTIFICATION: COUNTRY OF DESTINATION_ NUMBER OF CERTIFICATES REQUESTED
TOTAL AMOUNT OWED: \$155.00 CHECK NUMBER: 2571 PLEASE CONTACT TINA AT 850-508-1891 FOR ANY PROBLEMS OR INFORMATION ON THIS MATTER. Thank you!
Tina Goff, President

,~-, ~-.

COVER LETTER

940 Court Street	Clearwater, LLC			
SUBJECT:	Name of	Limited Liability Compa	any	
			o Transact Business in Florida," bility company to transact busine	
Please return all correspondence	e concerning this matter to the	following:		
<u> </u>	N	lame of Person		
	F	irm/Company		
		Address		
	City/S	State and Zip Code		SEC TALL 16
Andrew.Scarle	ctt@scarletthotelgroup.com	Mile and Esp Code		W ARAT
	E-mail address: (to be use	d for future annual repor	t notification)	· · · · · · · · · · · · · · · · · · ·
For further information concern	ing this matter, please call:			₩ 9:
Margaret Alexander		at ()	9-6721	
Nam	e of Contact Person	Area Code	Daytime Telephone Number	
MAILING ADDRES Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314	ms	Divis Regi Clift 2661	EET ADDRESS: sion of Corporations stration Section on Building Executive Center Circle shassee, FL 32301	
Enclosed is a check for the followard \$125.00 Filing Fee	owing amount: \$\Boxed{\Boxesian}\$\$ \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee	: & □ \$160.00 Filing Fce, Ce of Status & Certified Cop	

DocuSign Envelope ID: DD82D2BF-F782-4D88-87F6-D58D2B0D8BF8

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. 940 Court Street Cleary			
(Name of Fore	eign Limited Liability Company; must include "Limited Liab	nility Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter al Liability Company," "L.L.C,"	ternate name adopted for the purpose of transacting business	s in Florida. The alternate name must in	nclude "Limited
2. Delaware	3.		
(Jurisdiction under the law	of which foreign limited liability	(FEI number, if applicable)	
company is organized) upon qualification			
4. upon quantitation	(Date first transacted business in Florida, if prior to	registration.)	
2 Pharadaman 13:11	(See sections 605.0904 & 605.0905, F.S. to determine	penalty liability)	
5. 3 Strawberry Hill			
Nashville, TN 37215			
	(Street Address of Principal Office)		summer N
6. 3 Strawberry Hill			3 25 25 25 25 25 25 25 25 25 25 25 25 25
Nashville, TN 37215			S AA
	(Mailing Address)		7 33
7. Name and street addres	s of Florida registered agent: (P.O. Box NOT accepta	able)	တ ကျွင်
	NRAI Services, Inc.		
Name:	<u> </u>	-	1 9: 18
Office Address:	1200 South Pine Island Road	-	<u> </u>
	Plantation	Florida 33324	7
Registered agent's accep-	(City)	(Zip code)	
Having been named as redesignated in this applicate to complywith the provision accept the obligations of the control of the c	gistered agent and to accept service of process for the tion, I hereby accept the appointment as registered agons of all statutes relative to the proper and complete my position as registered agent. NRAI Services, Inc. By:	gent and agree to act in this capac	ity. I further agree
	(Registered agent's signature)	 	
8 The name title or capa	Eileen Chaddock, Special Asst. Sec city and address of the person(s) who has/have author	retary ity to manage is/are:	
Andrew Scarlett, Presiden		ny to thininge to in o.	
3 Strawberry Hill			_
Nashville, TN 37215			
	of existence, no more than 90 days old, duly authentic of which it is organized. (If the certificate is in a foreign ibmitted) 2007/48F-ASSEMMO Signature of an authorized person	n language, a translation of the cer	
	in accordance with section 605.0203 (1) (b), Florida S	Statutes. I am aware that any false ir	
submitted in a document to	the Department of State constitutes a third degree felo	iny as provided for in s.817.155, F.3	S.
	Andrew Scarlett Typed or printed name of signee		
	Typed of printed finite of signee		

Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "940 COURT STREET CLEARWATER, 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 EIGHTH DAY OF JUNE, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "940 COURT STREET CLEARWATER, LLC" WAS FORMED ON THE EIGHTEENTH DAY OF MAY, A.D. 2016.

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

6045762 8300

SR# 20164354259

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

Authentication: 202450954

Date: 06-08-16