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### ARNSTEIN & LEHR LLP Accomplished lawyers who understand your goals.

200 South Biscayne Boulevard · Suite 3600 Miami, Florida 33131 Phone 305.428.4500 · Fax 305.374.4744 www.arnstein.com

Georgina A. Mora 305.428.4665 gamora@arnstein.com

July 22, 2016

#### **VIA OVERNIGHT DELIVERY SERVICE**

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: SUNSET PALMS UNITED LLC

To Whom It May Concern:

Enclosed please find the following documents in connection with the application by foreign limited liability company for authorization to transact business in Florida:

- Completed and signed application by Registered Agent and Authorized Person for the LLC
- Good standing certificate from the state of Delaware
- Check in the amount of \$125.00 for the filing fee.

In addition, please find the return overnight UPS package to return the Certificate of Authority. Please call me with any questions at (305) 428-4665.

Very truly yours,

Georgina A. Mora

Real Estate Paralegal

#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT:	Sunset 1	Palms United, LL	.C		
	Name of I	Limited Liability	Company		
The enclosed "Application by For Existence, and check are submitted."	reign Limited Liability Comp ed to register the above refere	any for Authorizz need foreign limi	ation to Tra ted liability	insact Business in Florida," Ce company to transact business	rtificate of in Florida
Please return all correspondence of	concerning this matter to the	following:			
	Kevin	S. Grossfeld, Esc	].		
<u> </u>	Na	me of Person			
	Arnst	ein & Lehr LLP			
<del></del>	Fit	m/Company			
	200 S. B	iscayne Blvd, Sui	te 3600		
	-	Address			
	Mia	ımi, FL 33131			
	City/St	ate and Zip Code		· · · · · · · · · · · · · · · · · · ·	
	•	feld@arnstein.co			
	E-mail address: (to be used	for future annual	report noti	fication)	
For further information concerning	g this matter, please call:				
Kevin S. Grossfeld		305 at (	428-453	30	
Name o	f Contact Person	Area Code	Dayı	ime Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division of Registration Clifton Bu 2661 Exec	ADDRESS: of Corporations on Section ailding cutive Center Circle see, FL 32301	
Enclosed is a check for the following \$125.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	ig Fee &	□ \$160.00 Filing Fee, Certified Status & Certified Copy	īcate

### 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 RUSINESS. IN THE STATE OF FLORIDA:

Sunset Palms United, I						
(Name of For	eign Limited Liability Company; must i	include "Limited Liat	oility Company," "L.L.C.," or	"LLC.")		-
Liability Company," "L.L.C,	Iternate name adopted for the purpose on "LLC.")	of transacting business	s in Florida. The alternate nam	e must incl	ude "Lir	nited
2. Delaware		3. 81-1915023				
(Jurisdiction under the law company is organized)	of which foreign limited liability		(FEI number, if applicable)			-
4	(Date first transacted business (See sections 605.0904 & 605.09	in Florida, if prior to	registration.)	=		
5.	(See sections 605.0904 & 605.09 580 5th Avenue, Suite		penalty liability)			
· · · · · · · · · · · · · · · · · · ·	New York, NY 100	036		•		
<del>-</del>	(Street Address of Prit		·	•		
6.	580 5th Avenue, S	uite 900		\$ 00		
J	New York, NY	10036		E CR	3 =	- 14
	(Mailing Add			T.T.	[2	4 spotts
7. Name and street addres	s of Florida registered agent: (P.O.	•	ble)	97 m	CIT	
Name:	Kevin S. Grossfeld, Esq./Arnstein	n & Lehr LLP		EPS EPS	PM 12:	(-)
Office Address:	200 S. Biscayne Blvd, Suite 3600	<u> </u>		EME EME	<u> </u>	
	Miami		, Florida	) }		
Registered agent's accep	(City)		(Zip code)			
designated in this application complywith the provision	gistered agent and to accept service tion, I hereby accept the appointme ons of all statutes relative to the pro ny position as registered agent.	ent as registered ag	ent and agree to act in this	capacity.	I furth	ier agree
	(Registered	d agent s signature)				
8. The name, title or capa	city and address of the person(s) wh	no has/have authori	ty to manage is/are:			
Eliezer Gottlieb, Manager						
			<del></del>			
			<del>/</del>			
		/_/	<u> </u>			
This document is executed ubmitted in a document to	in accordance with section 605.020 the Department of State constitutes  Eliezer Go	3 (1) (b), Florida Se a third degree felor	latutes. I am aware that any ny as provided for in s.817.1	false infor 55, F.S.	mation	
	Typed or print	ted name of signee				

Page 1

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SUNSET PALMS UNITED, 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 JULY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SUNSET PALMS UNITED, LLC" WAS FORMED ON THE SIXTEENTH DAY OF MARCH, A.D. 2016.

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

5990756 8300 SR# 20164918144 Authentication: 202660410

Date: 07-14-16