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J. HARRIE

COVER LETTER

TO:		tion Section of Corporation:	s				
SUBJE							
Name of Limited Liability Company							
The end Existen	closed "Ap	plication by Fore	eign Limited Liability Compa I to register the above referen	any for Authorizaticed foreign limit	tion to Trai ed liability	nsact Business in Florida," company to transact busin	Certificate of ness in Florida
Please	return all c	orrespondence co	oncerning this matter to the f	ollowing:			
		KATHLEEN L	AX				
Name of Person							
SALVER & COOK, LLP							
Firm/Company							
2721 EXECUTIVE PARK DRIVE, SUITE 4							
Address						•	
WESTON, FL 33331							
City/State and Zip Code							•
K.LAX@PSCCPAS.COM							
E-mail address: (to be used for future annual report notification)							
For furt	her inforn	nation concerning	g this matter, please call:				
	KATHL	EEN LAX		954 at (389-130	33	
		Name o	f Contact Person	Area Code	Day	time Telephone Number	-
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314				Division of Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle ee, FL 32301		
Enclose	ed is a che □ \$125.	ck for the follow 00 Filing Fee	ing amount: \$\hat{X}\$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Cof Status & Certified Co	



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 3, 2016

KATHLEEN LAX SALVER & COOK, LLP 2721 EXECUTIVE PARK DRIVE, SUITE 4 WESTON, FL 33331

SUBJECT: BRILL 5002 II LLC Ref. Number: W16000053610

We have received your document for BRILL 5002 II LLC and your check(s) totaling \$1040.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 716A00016318

2016 AUS 12 PM 3: 06

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: BRILL 5002 II, 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.") **DELAWARE** (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 2851 NE 183 STREET, SUITE 1408E AVENTURA, FL 33160 (Street Address of Principal Office) 2851 NE 183 STREET, SUITE 1408E AVENTURA, FL 33160 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) SALVER & COOK, LLP Name: 2721 EXECUTIVE PARK DR., SUITE 4 Office Address: WESTON , Florida 33331 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 complywith 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's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: VANESSA PIEDRAHITA, AP 2721 EXECUTIVE PARK DR., SUITE 4 WESTON, FL 33331 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) Signature of an authorized person

submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

VANESSA PIEDRAHITA

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information

<u>Delaware</u>

The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "BRILL 5002 II 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 AUGUST, A.D. 2016.

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

Authentication: 202791328

Date: 08-08-16

6077534 8300 SR# 20165271146

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