## m60000766

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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> 16 SEP 23 AN 9: 12 SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED

16 SEP 23 PM 3. I

D. SCOTT **SEP** 2 8 2016

September 27, 2016



Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

\*RE-SUBMIT\* Please Islain original filing date of submission 943

Re:

Order #: 70636613 WO

Customer Reference 1: 6625-013

Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:

Uhon Daytona Shores Resort Fee Owner, LLC (DE) Registration

Florida

Uhon Daytona Shores Resort Fee Owner, LLC (DE) Cert Copy of Application for Authority-Foreign

Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092.

Thank you very much for your help.

Sincerely,

Connie R Bryan Senior Fulfillment Specialist Connie.Bryan@wolterskluwer.com





## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 26, 2016

CT CORPORATION

SUBJECT: UHON DAYTONA SHORES RESORT FEE OWNER, LLC

Ref. Number: W16000066021

SECRETARY OF STATE TALL AND SSEEF, FLORIDA

We have received your document for UHON DAYTONA SHORES RESORT FEE OWNER, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Please return your document, along with 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.

Dionne M Scott Regulatory Specialist II

Letter Number: 816A00020596

\*RE-SUBMIT\*
Please retain original filing
date of submission 9123

## COVER LETTER

	stration Section sion of Corporations				
SUBJEC	Uhon Daytona Shores Resort Fee Owner, LLC				
Name of Limited Liability Company					
The enclo	"Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of check are submitted to register the above referenced foreign limited liability company to transact business in Floric	of da			
Please re	all correspondence concerning this matter to the following:				
	Debbie Secard				
	Name of Person				
	Sherry Meyerhoff Hanson & Crance LLP				
Firm/Company					
	610 Newport Center Drive, Suite 1200  Address				
Address					
	Newport Beach, CA 92660	T			
	City/State and Zip Code	ڗ			
	dsecard@calawyers.com				
	E-mail address: (to be used for future annual report notification)				
For furth	formation concerning this matter, please call:				
	bie Secard 949 719-1200				
•	Name of Contact Person Area Code Daytime Telephone Number				
	STREET ADDRESS: Sion of Corporations Stration Section Box 6327 Bhassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				
	check for the following amount:  125.00 Filing Fee				

## 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 BY SINFSS IN THE STATE OF BY ORDER.

ISINESS IN THE STATE OF FLORIDA				
elgn Limited Liability Company; mus	it include "Limited Li	ability Company," "L.L.C.,"	or "LLC.")	_
ternate name adopted for the purpose	of transacting busine	ess in Florida. The alternate	name must include "Li	 imited
,	, 81-3934421			
of which foreign limited liability	J	(FEI number, if applical	ble)	-
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(Date first transacted busine. (See sections 605.0904 & 605.	ss in Florida, If prior t	o registration.)		7
			- 美国	- SE
				23
(Street Address of P	'rincipal Office)			1
			723	
				ά
(Mailing A	(ddress)		- 57,711	12
s of Florida registered agent: (P.	O. Box <u>NOT</u> accep	table)		
C T Corporation System				
1200 South Pine Island Road				
Plantation		_ , Florida 33324		
		(Zip code)		
elstered agent and to accept servi ion, I hereby accept the appointi ns of all statutes relative to the p by position as registered agent.	ment as registered a proper and complete stem	igent and agree to act in e performance of my dut	this capacity. I furi ties, and I am famili	ther agree ar with and
зу:	<u> </u>	me Buyme	Trours but	if. [1]
acity and address of the person	(s) who has/have at	ithority to manage is/are	THE STATE STATE	rsieg
sort, LLC, sole member; 16	5 S De Lacey Ave,	Unit 2046, , Pasadena,	CA 91105	
16	5 S De Lacey Ave,	Unit 2046, , Pasadena,	CA 91105	
f which it is organized, (If the cer				
Signature o	f an authorized person	n		
the Department of State constitute				ı
	inted name of signee		<del></del>	
	Resort Fee Owner, LLC  Eign Limited Liability Company; must  Iternate name adopted for the purpose "or "LLC.")  of which foreign limited liability  (Date first transacted basines (See sections 605.0904 & 605.0  Jnit 2046, , Pasadena, CA 91105  (Street Address of Pasadena, CA 91105  (Mailing A Mailing A Ma	sign Limited Liability Company; must include "Limited Liternate name adopted for the purpose of transacting busines" or "LLC.")  3. 81-3934421 of which foreign limited liability  (Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determine Julit 2046, Pasadena, CA 91105  (Street Address of Principal Office) init 2046, Pasadena, CA 91105  (Mailing Address)  Sof Florida registered agent: (P.O. Box NOT acception C T Corporation System  1200 South Plue Island Road  Plantation  (City) ance: Estered agent and to accept service of process for the long of all statutes relative to the proper and complete to position as registered agent. By:  (Registered agent's signature) acity and address of the person(s) who has/have and the proper agent and the proper agent agent, and the proper agent agent and address of the person(s) who has/have and the proper agent agent agent, and the proper agent agent agent, and address of the person(s) who has/have and the proper agent agent agent, and the proper agent agent agent agent agent agent agent and address of the person(s) who has/have and the proper agent ag	Resort Fee Owner, LLC  Pign Limited Liability Company; must include "Limited Liability Company," "L.L.C.,"  Iternate name adopted for the purpose of transacting business in Florida. The alternate "or "LLC.")  3. 81-3934421  of which foreign limited liability  (FEI number, If applical (FEI number, If application,	Resort Fee Owner, LLC  right Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")  iternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability"  3. 81-3934421  (FEI number, If applicable)  (Date first transacted business in Florida, if prior to registration.)  (See sections 605.0904 & 605.0905, P.S. to determine penalty liability)  Juit 2046, Pasadena, CA 91105  (Street Address of Principal Office)  (Mailing Address)  a of Florida registered agent: (P.O. Box NOT acceptable)  C T Corporation System  1200 South Pine Island Road  Plantation  (City)  ance:  Islated agent and to accept service of process for the above stated limited liability company at the state of the appointment as registered agent and agree to act in this capacity. I furns of all statutes relative to the proper and complete performance of my duties, and I am famility position as registered agent.  (City)  (Registered agent, as all statutes relative to the proper and complete performance of my duties, and I am famility position as registered agent.  (Registered agent, 165 S De Lacey Ave, Unit 2046, Pasadena, CA 91105  secrit, LLC, sole member; 165 S De Lacey Ave, Unit 2046, Pasadena, CA 91105  of existence, no more than 90 days old, duly authenticated by the official having custody of records fwhich it is organized. (If the certificate is in a foreign language, a translation of the certificate un omitted)  Signature of an authorized person  in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.  Rushan Wu

<u>Delaware</u>

The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "UHON DAYTONA SHORES RESORT FEE OWNER,

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 TWENTY-SECOND DAY OF SEPTEMBER, A.D.

2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES

HAVE BEEN ASSESSED TO DATE.

16 SEP 23 M 9 12 SEORETARY OF STATE TALLAHASSEE FLORIDA

e at corp.delaware.gov/aut

Authentication: 203039265

Date: 09-22-16

6160004 8300

SR# 20165897725

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