Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : STEINBERG GARELLEK P.L.

Account Number : 120110000015 Phone : (561)391-3344 Fax Number : (561)948-4713

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EMAIL Address: SZG@ STEINGARLAW. 0074

Foreign Limited Liability Company EMBARCADERO GP LLC

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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:

	EMBARCADERO GP LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
If n	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limite bility Company," "L.L.C." or "L.L.C.")	d
-/11	DELAMADE NIA	
	Jurisdiction under the law of which foreign famited hability (FEI number, if applicable)	
	company is organized)	
4.	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penulty liability)	
	2500 N. Military Trail, Suite 285	
5.		
	Boca Raton, FL 33432 (Street Address of Principal Office)	
	2500 N. Military Trail, Suite 285	
5		
	Boca Raton, FL 33432	
	(Malling Address)	
7.	The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	
	Ronald Eisenberg, Manager	
Q.	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the offici	ial
hay	ving custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not	
	ceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translates to submitted)	tor
	isi de subinited)	
2114	$m{I}$	
1114	A451-	
	Signature of an authorized person	
(In a	Signature of an authorized person accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated become name that any take information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$.817.155, F.S.)	ute (ruc.
(In a	Signature of an authorized person accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penantes of perjuty that the facts stated become	ate (ruc.
(In a	Signature of an authorized person accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penanties of perjusy that the facts stated become aware that any take information submitted in a document to the Department of State constitutes a third deprec felony as provided for in s.817.153, F.S.) Lawrence Steinberg, Authorized Representative Typed or printed name of signee	ute (rue.
(In a	Signature of an authorized person accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penantes of perjury that the facts stated become aware that any take information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$.817.155, F.S.) Lawrence Steinberg, Authorized Representative:	ute (ruc.

850-617-6381

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA

STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE
FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERES
AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:	
EMBARCADERO GP LLC	
If unavailable, the alternate to be used in the state of Florida is:	

2. The name and the Florida street address of the registered agent and office are:

SG REGISTERED AGENT LLC (Name) 200 E PALMETTO PARK RD, #103 Florida Street Address (P.O. Box NOT ACCEPTABLE) **BOCA RATON** Clty/State/Zip

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 certificate. 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605. Florida Statutes.

(Signature)

Filing Fee for Application \$ 100.00 Designation of Registered Agent \$ 25.00 Certified Copy (optional) \$ 30.00 5.00 Certificate of Status (optional)



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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "EMBARCADERO OF 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 NINTH DAY OF SEPTEMBER, A.D. 2016.

6051904 8300 SR# 20165724120

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

Jahrey W. Balleds, Vaccentary of Balls

Authentication: 202967429

Date: 09-09-16