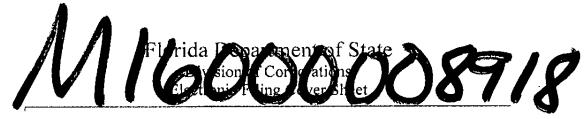
**Division of Corporations** 

Page 1 of 2



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H160002751913)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From: .

Account Name : FLAGLER DEVELOPMENT GROUP, LLC

Account Number : 120020000144 : (305)520-2344 : (305)520-2400 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

#### Foreign Limited Liability Company Central Fare LLC

Certificate of Status 0 Certified Copy 03 Page Count Estimated Charge \$125.00

O SIMMONS

--- NOV 0-8-2016

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TO:

Registration Section Division of Corporations

Central Fare LLC

#### **COVER LETTER**

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this	matter to the	following:		
Jessica Perez				
	N	ame of Person		
Florida East C	oast l	ndustries	, LLC	
	F	irm/Company		
2855 Le Jeune	∍ Rd.,	4th Floor	•	
		Address		
Coral Gables,	FL 33	134		_
	City/S	tate and Zip Code		
jessica.perez@	gfeci.c	com		
E-mail addre	ss: (to be used	for future annual rep	ort notifica	tion)
For further information concerning this matter, pl	easc call:			
Jessica Perez		_ <sub>at (</sub> 305	520	-2366
Name of Contact Person	1	Area Code	Day	time Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Division Registra Clifton 2661 Ex	ET ADDRESS: n of Corporations ation Section Building secutive Center Circ ssee, FL 32301	:le	
Enclosed is a check for the following am	ount:			
■ \$125.00 Filing Fee □ \$130.00 Fi Certificate		S155.00 Filing Certified Copy		☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

### 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. Central Fare 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 Liability Company," "L.L.C," or "L.E.C.")	ne must include "Limited
<sub>2.</sub> Delaware <sub>3.</sub>	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable company is organized)	ole)
4.	16 16
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
<sub>5</sub> 2855 Le Jeune Rd., 4th Floor	2 1
Coral Gables, FL 33134	FILED
(Street Address of Principal Office)  6. 2855 Le Jeune Rd., 4th Floor	8: 52
Coral Gables, FL 33134	<i>₹</i> ^
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to ma	nage is/are:
P. Michael Reininger (P); Vincent Signorello (VP); Marshall Bruce S	inyder (VP);
Kolleen Cobb (VP, S); Juan (Rusty) Godoy (VP, T, AS);	
Heather Enderby (VP, CFO);	
8. Attached is an original certificate of existence, no more than 90 days old, duly authenti having custody of records in the jurisdiction under the law of which it is organized. (A phacceptable. If the certificate is in a foreign language, a translation of the certificate under must be submitted)  Signature of an authorized person (In accordance with section 605,0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided Kolleen O.P. Cobb, Vice President	notocopy is not oath of the translator  hat the facts stated herein are true.
Typed or printed name of signee	-

## 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 REGISTERED AGENT IN THE STATE OF FLORIDA.

	ne of the Limited Liability Com al Fare LLC	npany is:		_
If unavaila	ble, the alternate to be used in t	he state of Florida is:		
2. The nan	ne and the Florida street address	s of the registered agent and office are:		,
	Kolleen O.P. C	obb	16 NOV	-79
		(Name)		
	2855 Le Jeune Rd., 4th Floor		-7 -	П
	Florida Street A	ddress (P.O. Box NOT ACCEPTABLE)	- A	Ü
	Coral Gables	FL 33134	M 8: 52	

City/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)

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

#514 P.005/005

# Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "CENTRAL FARE 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 FOURTH DAY OF NOVEMBER, A.D. 2016.

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

Authentication: 203282892

Date: 11-04-16

6172693 8300 SR# 20166502876

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