

Division of Corporations

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19542080845 From: Ranae McGraw



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# Foreign Limited Liability Company SPT IVEY LAKEWOOD MOB LLC

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$155.00

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2016-11-09 15:48:27 CST

19542080845 From: Ranae McGraw

### COVER LETTER

TO: Registration Section Division of Corporations

SPT Ivey Lakewood MOB LLC
SUBJECT:

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:

Andrew J. Sossen

Name of Person

SPT Ivey Lakewood MOB LLC

Firm/Company

c/o Starwood Property Trust, Inc, 591 West Putnam Avenue

Address

Greenwich, CT 05830

	City/S	itate and Zip Code		AT	6	
asossen@starwo	ood.com			ECG	-	
	E-mail address: (to be use	d for future annual r	eport notification)		NON	щ
For further information concerning this matter, please call:					<b>6</b> -	
Andrew J. Sossen		203at (	422-8191		AN	ЕD
Name of Contact Person		Area Code	Daytime Telephone Nu	mber ORID	ې	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassec, FL 32301			32	
Enclosed is a check for the follow	ving amount: I \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Certified Copy	Fee & □ \$160.00 Filing of Status & Certif		:	

### 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:

### SPT Ivey Lakewood MOB LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LI.C.")

(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 "L.L.C,")

(Date limit transacted business in Flands, if mins to registration )

2. Delaware	3.
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)

_		(See sections 605,0904 & 605,0905. F.S. to determin	e penalty li	iability)			
5.		nue, Greenwich, CT 06830			TAL	16	
6.		(Street Address of Principal Office)				NON	Ξ
	591 West Putnam Avenue, Greenwich, CT 06830 (Mailling Address)		ARY OF	-9	LEC		
<ol> <li>Name and street addr Name:</li> </ol>		is of Florida registered agent: (P.O. Box <u>NOT</u> accept C T Corporation System	table)		FLORI	E 6 W	U
Office A	Office Address:	1200 South Pine Island Road	-		) A	32	
		Plantation	. Florida	33324			

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 comply with 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 signatypy

(Zip code)

Secretary

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

C T Contoration System

(City)

Andrew J. Sossen-Vice President and Secretary

By:

Jeffrey DiModica-President

**Rina Paniry-Chief Financial Officer** 

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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Andrew Sossen - Authorized Person

Typed or printed name of signee

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SPT IVEY LAKEWOOD MOB 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 NOVEMBER, A.D. 2016.

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

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SR# 20166564440 You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203306758 Date: 11-09-16

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