116000010310

(Requestor's Name)						
(Address)						
(Address)						
. (City/State/Zip/Phone #)						
PICK-UP	MAIT WAIT	MAIL				
<i>:</i>						
(Business Entity Name)						
	•	,				
(Document Number)						
	,					
Cortified Conies	Cortificator	s of Status				
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



1:



400293303014

12/22/16--01019--019 **160.00

2016 DEC 22 PH 3: 31

K. SALY DEC 23 2016

COVER LETTER

то:	Registration Section Division of Corporation	ns					
SUBJ	SROA Pencader LL	С					
		Name of I	Limited Liability C	ompany			
					nsact Business in Florida," Certificate o company to transact business in Florida		
Please	return all correspondence o	concerning this matter to the	following:				
	Claudia Morais	Claudia Morais					
		Na	ame of Person	· · · · · · · · · · · · · · · · · · ·	-		
	Elite Stor Capit	Elite Stor Capital Partners					
	Firm/Company						
	324 Datura Street, Suite 338						
	Address						
	West Palm Bea	West Palm Beach, FL 33401					
-	:	City/State and Zip Code					
claudia@elite-stor.com							
•		E-mail address: (to be used	for future annual	report not	fication)		
For fu	ther information concernin	g this matter, please call:					
	Claudia Morais		561 at (708-1575			
	Name o	of Contact Person	Area Code	Day	time Telephone Number		
	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 Tallahassee, FL 32301				
Enclos	ed is a check for the follow ☐ \$125.00 Filing Fee	ring amount: \$\square\$ \$\square\$ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy	g Fee &	■ \$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: L SROA Pencader 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.") 2. Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) 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) 324 Datura Street, Suite 338, West Palm Beach, FL 33401 (Street Address of Principal Office) 324 Datura Street, Suite 338, West Palm Beach, FL 33401 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporate Creations Network Inc. Name: 11380 Prosperity Farms Road #221E Office Address: Palm Beach Gardens (City) 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 appointfulent astregistered agent and agree to act in this capacity. I further agree to complywith the provisions of all statutes relative to the properfund complete performance of my duties, and I am familiar with and accept the obligations of my position as registered ag egistered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: SROA URS Wilmington LLC - Benjamin S. Macfarland, III, its Manager 324 Datura Street, Suite 338, West Palm Beach, FL 33401 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. Benjamin S. Macfarland, III Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SROA PENCADER 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 SIXTEENTH DAY OF NOVEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SROA PENCADER LLC" WAS FORMED ON THE FOURTEENTH DAY OF NOVEMBER, A.D. 2016.

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





Authentication: 203345190

Date: 11-16-16

6214346 8300 SR# 20166656464