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.

(((H16000306512 3)))



H160003085123ABCY

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

: CORP USA

Account Number : 072450003255

Phone

: (305)634-3694

Fax Number

: (305)633-9696

**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 SURY PROPERTIES EMPEROUSE,

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

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Electronic Filing Menu

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6 2017 MAL



December 15, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORP USA

SUBJECT: SURY PROPERTIES, LLC

REF: W16000083781

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is L14000056538 SURY PROPERTY, LLC.

Flease 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.

Stacey M Warren Regulatory Specialist II FAX Aud. #: H16000306512 Letter Number: 216A00026658

P.O BOX 6327 - Tallahassee, Florida 32314

Application by foreign limited liability company for authorization to transact business in Florida

IN COMPLIANCE WITH SECTION 803.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIMITED COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
(Nane) of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate dame adopted for the purpose of transacting business in Floride. The alternate name must include "Limited Limites Company," L. L. G., or "LLC.")	
2 Junispecials and or the law of which foreign limited tunbildy (FEI number, if applicable)	
Avant 17 2016	
(See accions 605 0904 4 605 0905 F.S. to determine penalty limbility)	
s 201 Albambia Gale - Juite 102	
Coral Coshlet - 12 33134	
- Pame at above	
(Mailing Address)	
7. Name and street address of Florida registered agent: (P.O. Box <u>NOT acceptable)</u>	
Office Address: 201 Mhambra Circle - Juite 702	
Cored Gables , Florida 33134 (Zip code)	
Registered agent's acceptance: Having been named as registered agant und to accept service of process for the above stated limited liability company at the place lesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree	
tergrames in this approximent, I necess detect the approximent as regarded upon upon and of the interest of the complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.	
at up the distinuity of my passion as regarded agent	
(Registered agent's signalure)	ž
V. The pame, title or capacity and address of the personas) who has/have authority/to manage is/are:	€,
JOIC Chacalo Hill Wharized Person	
TO MINIMA LI FORT TOTAL TOTAL	
[Ma] County M. 33134	
Attached is a certificate of existence, no more than 90 days old, duly authenticated by the ufficial having custody of records in the purisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under dath of the translator must be submitted)	
I'the translator must be submitted)	
Attached is a certificate of existence, no more than 90 days old, duly authenticated by the utilicial having custody of records in the particular in 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) Segmently of an authorized person	
his document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any falso information abmitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	
distributed in a deciminant to the Department of state Constitutes a sinto degree tetring to provided to in 5.017,199, 1.3.	
Typed or printed name of signee	

9696889908 11:91 4102/90/10

<u>Delaware</u>

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAMARE, DO HERERY CERTIFY "SURY PROPERTIES, LLC" IS DULY FORMED
UNDER THE LAWS OF THE STATE OF DELAMARE AND IS IN GOOD STANDING AND
HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS
OF THE THIRTEENTH DAY OF DECEMBER, A.D. 2016.

AND I DO HERESY FURTHER CERTIFY THAT THE SAID "SURY PROPERTIES, LIC" WAS FORKED ON THE RIGHTEPHTH DAY OF RUGUST, A.D. 2016.

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

6127358 8300 SR# 20167048206

You may werify this certificate online at corp.delaware.gov/authver.shimi

MSRS.

Authentication: 203500724

Date: 12-13-16

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