# M17000000985

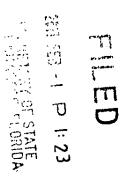
| (Requestor's Name)                      |  |  |  |  |  |  |
|---|--|--|--|--|--|--|
| (Address)                               |  |  |  |  |  |  |
| (Address)                               |  |  |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |  |  |
| (Document Number)                       |  |  |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |

Office Use Only



200294897862

02/01/17--01015--009 \*\*160.00



**S Warren** FEB 0 3 2017

#### COVER LETTER

TO:

Registration Section

| Div               | ision of Corporations   |  |  |  |  |  |  |
|-------------------|---|--|--|--|--|--|--|
| SUBJECT:          | Red Rocks 88, LLC   |  |  |  |  |  |  |
| 302,,,,           | Name of Limited Liability Company   |  |  |  |  |  |  |
|                   |   | any for Authorization to Transact Business in Florida," Certificate of need foreign limited liability company to transact business in Florida. |  |  |  |  |  |
| Please return     | all correspondence concerning this matter to the  | following:   |  |  |  |  |  |
|                   | John P. Grygiel, Esq.   |  |  |  |  |  |  |
|                   | Name of Person  |  |  |  |  |  |  |
|                   | Zimmerman Kiser Sutcliffe, P.A.   |  |  |  |  |  |  |
|                   | Firm/Company  |  |  |  |  |  |  |
|                   | 315 E. Robinson Street, Suite 600   |  |  |  |  |  |  |
|                   | Address   |  |  |  |  |  |  |
|                   | Orlando, FL 32801   |  |  |  |  |  |  |
|                   | City/State and Zip Code   |  |  |  |  |  |  |
|                   | yoni@lincolnavecap.com  |  |  |  |  |  |  |
|                   | E-mail address: (to be used   | for future annual report notification)   |  |  |  |  |  |
| For further i     | nformation concerning this matter, please call:   |  |  |  |  |  |  |
| Jol               | nn P. Grygiel   | 407 425-7010<br>at ()  |  |  |  |  |  |
|                   | Name of Contact Person  | Area Code Daytime Telephone Number   |  |  |  |  |  |
| Div<br>Reg<br>P.C | ALING ADDRESS: vision of Corporations gistration Section b. Box 6327 tahassee, FL 32314 | STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301              |  |  |  |  |  |
|                   | a check for the following amount: \$125.00 Filing Fee                                   | ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy  |  |  |  |  |  |

# APPLICATION BY FOREIGN L'IMITED 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:

| , Red Rocks 88, LLC  | SINESS IN THE STATE OF FEDINGAL   |         |                      |                               |                        |  |                                 |
|--|---|---------|----------------------|-------------------------------|------------------------|--|---------------------------------|
| (Name of Fore  | eign Limited Liability Company; must  | inclu   | de "Limited Liab     | ility Company," "L.L.C"       | or "LLC.")             |  | _                               |
| Liability Company," "L.L.C,"   | itemate name adopted for the purpose (" or "LLC.")  | of trai | nsacting business    | s in Florida. The alternate n | ame must in            | clude "L                               | imited                          |
| 2. Colorado  |   | 3       | 81-5027480           |                               |                        |  |                                 |
| (Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if applied to applie the law of which foreign limited liability company is organized) |   |         |                      | (FEI number, if applicab      | le)                    |  |                                 |
| 4  |   |         |                      |                               |                        |  |                                 |
|  | (Date first transacted business<br>(See sections 605.0904 & 605.0   | in Fl   | orida, if prior to   | registration.)                |                        |  |                                 |
| 5. 595 Madison Avenue,   |   |         |                      |                               |                        |  |                                 |
| New York, NY 10022   |   |         |                      |                               |                        |  | hansa <b>g</b> liker <b>g</b> . |
|  | (Street Address of Pr   | incipa  | l Office)            |                               | 724<br>1044            | . 77                                   | 1 \$                            |
| 6. 595 Madison Avenue,   | Suite 1601  |         |                      |                               |                        | :::::::::::::::::::::::::::::::::::::: | 1,                              |
| New York, NY 10022   |   |         |                      |                               | 32                     |  | 177                             |
|  | (Mailing Ac   | Idress  | 3)                   | •                             |                        | Ü                                      |                                 |
| 7. Name and street address   | s of Florida registered agent: (P.C   | ). Bo   | x <u>NOT</u> accepta | ible)                         | ORII                   | l: 2                                   |                                 |
| Name:  | John P. Grygiel   |         |                      | -                             | 0E<br>A                | ω̈                                     |                                 |
| Office Address:  | 315 E. Robinson Street, Suite 600   | 0       |                      |                               |                        |  |                                 |
|  | Orlando   |         |                      | , Florida <u>32801</u>        |                        |  |                                 |
|  | (City)  |         |                      | (Zip code)                    | <del></del>            |  |                                 |
| designated in this applica<br>to complywith the provision  | gistered agent and to accept serviction, I hereby accept the appointmons of all statutes relative to the piny position as registered agent. | ient o  | is registered ag     | ent and agree to act in i     | this capaci            | y. I fui                               | rth <b>er</b> agree             |
|  | _   | _       |                      |                               |                        |  |                                 |
| 8. The name, title or capa   | icity and address of the person(s) w  | vho h   | as/have authori      | ty to manage is/are:          |                        |  |                                 |
| Jonathan A. Gruskin, Sol   | e Member  |         |                      |                               |                        | _                                      |                                 |
| 595 Madison Avenue, Sui  | te 1601   |         |                      |                               |                        | -                                      |                                 |
| New York, NY 10022   |   |         | <del></del>          |                               |                        | _                                      |                                 |
| 9. Attached is a certificate jurisdiction under the law of the translator must be su   | of existence, no more than 90 days of which it is organized. (If the certabolisted)  Signature o  | tifica  | te is in a foreig    | n language, a translation     | g custody of the certi | f record                               | ds in the<br>nder oath          |
|  | in accordance with section 605.02 the Department of State constitute  |         |                      |                               |                        |  | n                               |

Typed or printed name of signee

Jonathan A. Gruskin

### OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

#### CERTIFICATE OF FACT OF GOOD STANDING

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Red Rocks 88, LLC

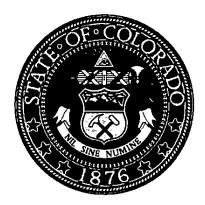
is a

#### Limited Liability Company

formed or registered on 01/13/2017 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20171032696.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 01/26/2017 that have been posted, and by documents delivered to this office electronically through 01/30/2017 @ 10:20:30 .

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 01/30/2017 @ 10:20:30 in accordance with applicable law. This certificate is assigned Confirmation Number 10047689



Secretary of State of the State of Colorado

\*\*End of Certificate\*\*\*\*\*

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.us/biz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click "Businesses, trademarks, trade names" and select "Frequently Asked Questions,"



Business Home Business Information Business Search

## **Certificate Validation**

FAQs, Glossary and Information

Certificate of Fact of Good Standing #10047689 was issued by our office.

| Confirmation # | 10047689          |
|----------------|-------------------|
| Issued on      | 01/30/2017        |
| Name           | Red Rocks 88, LLC |
| ID number      | 20171032696       |