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LAHASSEE, FLORIDA

S Warren

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FEB 2 1 2017

COVER LETTER

TO:

C1!D 11	ver.	ICON BRICKELL 3802 II, LLC					
SUDJE	ECT:						
The en Exister	nclosed "Application by Fo	oreign Limited Liability Com ed to register the above refer	pany for Authoriza enced foreign limit	tion to Tra ed liabilit	ansact Business in Florida," y company to transact busin	' Certificate of tess in Florida.	
Please	return all correspondence	concerning this matter to the	following:				
	KATHLEEN	LAX					
			lame of Person			-	
	SALVER & C	SALVER & COOK, LLP					
		F	irm/Company		···		
	2721 EXECU	TIVE PARK DRIVE, SUITI	E 4				
			Address				
	WESTON, FL	WESTON, FL 33331					
		City/\$	State and Zip Code	_			
	K.LAX@PSCC	PAS.COM					
		E-mail address: (to be use	d for future annual	report no	tification)	-	
For fur	rther information concerni	ng this matter, please call:					
	KATHLEEN LAX		954 at (389-13	333		
	Name	of Contact Person	Area Code	Day	ytime Telephone Number	-	
	MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton B 2661 Exc	of Corporations ion Section Building ecutive Center Circle see, FL 32301		
Enclos	sed is a check for the follow ☐ \$125.00 Filing Fee	wing amount: S130.00 Filing Fee & Certificate of Status	S155.00 Filin Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, C of Status & Certified Co		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	ICON BRICKELL 38		
(Name of Fore	ign Limited Liability Company: must include "	Limited Liability Company," "L.L.	C.," or "LLC.")
(If name unavailable, enter al Liability Company," "L.L.C," DELAWARE	ternate name adopted for the purpose of transaction "LLC.")	ting business in Florida. The altern	ate name must include "Limited
	of which foreign limited liability	(FEI number, if app	licable)
4	(Date first transacted business in Floric (See sections 605.0904 & 605.0905, F.S.	la, if prior to registration.) to determine penalty liability)	
5. 2851 NE 183 ST., #140	08E		
AVENTURA, FL 331	(Street Address of Principal O	flice)	
6. <u>2851 NE 183 ST., #140</u>	•		
AVENTURA, FL 331	60		
	(Mailing Address)		(2) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
7. Name and street addres	s of Florida registered agent: (P.O. Box 1	NOT_acceptable)	SARY - ITT
Name:	SALVER & COOK, LLP	<u></u>	FILED FILED 1 FEB 21 P 1
Office Address:	2721 EXECUTIVE PARK DR., SUITE	4	S 49
	WESTON	, Florida 33331	DM o
Registered agent's accep	(City)	(Zip ce	ode)
Having been named as re designated in this applica- to complywith the provision	gistered agent and to accept service of protion. I hereby accept the appointment as rooms of all statutes relative to the proper any position as registered agent (Registered agent)	registered agent and agree to ac ad complete performance of my	t in this capacity. I further agree
8. The name, title or capa	eity and address of the person(s) who has/	have authority to manage is/are:	
VANESSA PIEDRAHITA	A, AP		
	of existence, no more than 90 days old, du of which it is organized. If the cettificate abmitted)		
	Signature of an authorized	orized person	
This document is executed submitted in a document to	in accordance with section 605.0203 (1) (I the Department of State constitutes a third VANESSA PI	degree felony as provided for in	hat any false information a s.817.155, F.S.

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 "ICON BRICKELL 3802 II 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 FIFTEENTH DAY OF FEBRUARY, A.D. 2017.

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

Authentication: 202040855

Date: 02-15-17

6295155 8300 SR# 20170912955