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.

(((H17000055067 3)))



H170000550673ABC+.

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 : CAPITOL SERVICES, INC.

Account Number : 120160000017

: (800)345-4647

Phone Fax Number

: (800) 432-3622

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 PRCP-KEY WEST I, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

O SIMMONSHelp

COVER LETTER

ТО;	Registration Section Division of Corporation	ons.				
SUBJE	SCT:	PRCP- Key W	IEJ+ I, LL of Limited Liability	С		
					insact Business in Florida," Certifica y company to transuot business in Fl	
Please r	eturn all correspondence	concerning this matter to the	he following:			
		Kathleen	SWENCKI Name of Person		namen description of the state	
	1	Priderock Cop	ital part	mers		
	·	525 OKEEC	hobee Bl Address	ud.,S	te. 1050	
		west Palm City	Beach, FL State and Zip Code	334	01	
		KSWENCK E-mail address: (to be us	i C PRCPL	LC.COr	fication)	
For furt	her information concernit	ng this metter, please call:				
	Kathleen S	of Contact Person	at (50) Area Code) <u>(05</u> Day	3-9332 time Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division of Registrati Clifton Br 2661 Exe	ADDRESS: of Corporations on Section ullding cutive Center Circle cc; PL 32301	
Enclose	d is a check for the follow D \$125.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	\$1,55.00 Filia Cartified Copy	ng 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 POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. PRCP-KEY West I LLC (Name of Foreign Llimited Liability Company, must include "Limited Liability Company," "LL.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 company is organized) 3. 81-52903UL (PEI number, if applicable)
4. (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
(See sections 605.0904 & 605.0905, P.S. to determine penalty liability) 5. 525 OKEECHODEE BIVD., Stc. 1050
West Palm Beach FL 33401 (Street Address of Principal Office)
6. 525 OKEECHOBEE BIND, Ste. 1450
West Palm Beach, Fl. 3340)
(Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box. NOT acceptable)
Name: <u>Kathleen Swencki</u>
Office Address: 525 OKEECHOBEE Blud, Ste. 1650
West Palm Beach, Florida 33401 (City) (Zip evde)
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 complywith 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 signature)
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: 525 Okeechobee Blvd, Ste 1650 David N. Khouru — Managina Metrober West Palm Beach, FL 33401
George W. Banks - Managing Member 525 Okeechobee Blvd., Ste 1656 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 fulse information submitted in a document to the Department of State constitutes a third degree felony as provided for in a 817.155, F.S.
Typed or printed name of signee

<u>Delaware</u>

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "PRCP-KEY WEST I, 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 TWENTY-SEVENTH DAY OF FEBRUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PRCP-KEY WEST I, LLC" WAS FORMED ON THE EIGHTH DAY OF FEBRUARY, A.D. 2017.

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

6310966 8300 SR# 20171318553

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

MSR

Authentication: 202105531

Date: 02-27-17