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.

(((H17000109652 3)))



H170001096523ABC+

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 : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

\*\*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 Davie D, LLC

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

Electronic Filing Menu Corporate Filing Menu

Help

K. SALY

APR 24 2017

### COVER LETTER

то;		ration Section n of Corporation	5				
SUBJI		ivie D, LLC					
			Name of I	Limited Liability C	ompany		
The en Exister	nclosed "A nce, and c	application by For heck are submitted	eign Limited Liability Comp I to register the above refere	eany for Authorizati enced foreign limite	ion to Tra d liability	nsact Business in Florida," company to transact busin	Certificate of ess in Florida
Please	return ali	correspondence c	oncerning this matter to the	following:			
		Jan R, Ezell, Co	orporate Paralegal				
	Name of Petson						
	Alston & Bird LLP						
		Firm/Company					
		1201 West Peachtree Street					
	Address  Atlanta, GA 30309-3424  City/State and Zip Code						
		sal.hernandez@i	ligazeley.com				
			E-mail address: (to be used	for future annual	report not	ification)	
For fu	rther infor	mation concerning	this matter, please call:				
	Jan R.	Ezell		404 at (	881-74		
		Name o	f 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 Tallahassoe, FL 32301					
Enclos		eck for the follow. 5.00 Filing Fee	ing amount: □ \$130.00 Filing Fee &	■ \$155.00 Filing	g Fee &	□ \$160.00 Filing Fee, C	ertificate
			Certificate of Status	Certified Copy	,	of Status & Certified Co	

#### io. Page 4 oi s

# 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: Davie D, 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) 1100 Peachtree Street NE, Suite 1000, Atlanta, GA 30309 (Street Address of Principal Office) 1100 Peachtree Street NE, Suite 1000, Atlanta, GA 30309 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: Plantation 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. Michael Jones C T Corporation System Assistant Secretary (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Verde Realty Operating Partnership, L.P. (Manager), 1100 Peachtree Street NE, Suite 1000, Atlanta, GA 30309 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)

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.

Signature of an authorized person

David Laibstain, Secretary of Verde Realty Operating Partnership, L.P., its Manager

Typed or printed name of signee

# Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "DAVIE D, 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-FIRST DAY OF APRIL, A.D. 2017.

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

SECRETARY OF STATE

40.7

6384831 8300

SR# 20172687217
You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202412579

Date: 04-21-17

1 ;;

FLORIDA