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.

(((H17000122075 3)))



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 : MICHAEL J. FREEMAN, P.A.

Account Number : 072720000142

Phone

: (305)442-1567

: (305)442-1227 Fax Number

**Enter the email address for this business entity to be used for futurar annual report mailings. Enter only one email address please. **

Email Address: mtreeman etreeman miami

Foreign Limited Liability Company **BROMPTON VILLAS LLC**

Certificate of Status	1
Centified Copy	1
Page Count	02
Estimated Charge	\$1,353.75

Electronic Filing Menu

Corporate Filing Menu

Help

FAX AUDIT NO.: H17000122075 3

K. SALY

MAY 1 1 2017

page :

FAX AUDIT NO.: H17000122075 3

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

	Limited Liability Company, must include "Limited			
DELAWARE *	Pame adopted for the purpose of transacting business in Fig.		ernete neme med facilité "Lémited Li 33-1226865	հանի Ըստրոպ," "L.I.C," ա ".I.C.")
Charlester under the law of vi	hith foreign limited hability company is organized)	3.	(F.) 64m	ber, l'especable)
AUGUST 2, 2012				یے
	(flats first transacted burnets in Florida, if prior to a (See sections 609,0904 & 505,0905, F.S. to determine	rgittration w penalty	Galling)	
153 SEVILLA AV	/ENUE	6.	P.O. BOX 140688	- C
CORAL GABLES			CORAL GABLES, F	L 33114-0868之态。
		•	e _{nt}	770
				Sylvan
Name and street addre	SE of Florida registered agent: (P.O. Box	a TOM	cceptable)	WO 3
Name:	M.J.F. REGISTERED AGENT	COR	<u>.P.</u>	33114-08688 HASEE, FLORIO
	4			
Office Address:	153 SEVILLA AVENUE			
gistored agent's acceptiving been named as resignated in this application of the complete complete the provident of the complete the provident of the complete th	CORAL GABLES (Chy) tances glatered agent and to accept service of p. glater, I hereby accept the appointment as	registe	red agent and agree to act	in this capacity. I further agree dules and I am familiar with
rgistored agent's accept aving been named as a signated in this applica county with the provise	CORAL GABLES (Chy) tances glatered agent and to accept service of p. glater, I hereby accept the appointment as	registe	or the above stated finites red agent and agree to act	in this capacity. I further agree dules and I am familiar with
rgistored agent's accept aving been named as a signated in this applica county with the provis	CORAL GABLES (Chy) tence: glstered agent and to accept service of p tion, I hereby accept the appointment as	registe	or the above stated finites red agent and agree to act	in this capacity. I further agree dules and I am familiar with
ngistored agent's acceptiving been named as re signated in this applica comply with the provis- d accept the obligation. The name, title or capt	coral Gables (Cay) Itances In a coupt service of prison, I hereby accept the appointment as the accept and statutes relative to the proper of sof my postilian as registered agent. (Registered agent's statistics and address of the person(s) who has	registe	for the above stated limited are agent and agree to act inplets performance of my Pressedient	in this campany at the place in this capacity. I further agree duties, and I am familiar with
egistored agent's acception to be a named as resignated in this applicationally with the provision accept the obligation. The name, title or captilities or Capacity.	coral Gables (Chy) stance: glistered agent and to accept service of p tion, I hereby accept the appointment as lons of all statutes relative to the proper s of my postilin as registered agent. (Registed agent's the active and address of the person(s) who has Name and Address:	registe	for the above stated limited are agent and agree to act inplete performance of my Released in the Control of th	in this capacity. I further agree dules and I am familiar with
egistored agent's acceptiving been named as resignated in this applicationally with the provision accept the obligation. The name, title or capt	coral gables (Cay) Itance: Inglistered agent and to accept service of priston, I hereby accept the appointment as so fine so of all statutes relative to the proper of so fine proper of the proper	registe	for the above stated limited are agent and agree to act inplets performance of my Pressedient	in this campany at the place in this capacity. I further agree duties, and I am familiar with
egistored agent's acceptiving been named as resignated in this applicationally with the provision accept the obligation. The name, title or captilities or Capacity.	coral Gables (Chy) stance: glistered agent and to accept service of p tion, I hereby accept the appointment as lons of all statutes relative to the proper s of my postilin as registered agent. (Registed agent's the active and address of the person(s) who has Name and Address:	registe	for the above stated limited are agent and agree to act inplets performance of my Pressedient	in this campany at the place in this capacity. I further agree duties, and I am familiar with
rgistored agent's acceptiving been named as resignated in this applicationally with the provision decept the obligation. The name, title or captilities or Capacity.	CORAL GABLES (Chy) Itance: Igistered agent and in accept service of p. Islan, I hereby accept the appointment as tons of all statutes relative to the proper is so f my posting as registered agent. (Registered agent accept to the proper is Interpretation of the person(s) who has Name and Address INTERLOCK DIRECTOR LTD. BUTELOCK DIRECTOR LTD. BUTELOCK DIRECTOR LTD.	registe	for the above stated limited are agent and agree to act inplets performance of my Pressedient	in this campany at the place in this capacity. I further agree duties, and I am familiar with
egistored agent's acceptiving been named as resignated in this applicationally with the provision accept the obligation. The name, title or captilities or Capacity.	CORAL GABLES (Chy) Itance: Inglistered agent and to accept service of position, I hereby accept the appointment as tons of all statutes relative to the proper is of my position as registered agent. (Required agent's the acity and address of the person(s) who has Name and Address INTERLOCK DIRECTOR LTD. BUT!, A PROMPERT HOUSE	registe	for the above stated limited are agent and agree to act inplets performance of my Pressedient	in this campany at the place in this capacity. I further agree duties, and I am familiar with
egistored agent's acception to be a named as resignated in this applicationally with the provision accept the obligation. The name, title or captilities or Capacity.	CORAL GABLES (Chy) Itance: Igistered agent and in accept service of p. Islan, I hereby accept the appointment as tons of all statutes relative to the proper is so f my posting as registered agent. (Registered agent accept to the proper is Interpretation of the person(s) who has Name and Address INTERLOCK DIRECTOR LTD. BUTELOCK DIRECTOR LTD. BUTELOCK DIRECTOR LTD.	registe	for the above stated limited are agent and agree to act inplets performance of my Pressedient	in this campany at the place in this capacity. I further agree duties, and I am familiar with
egistored agent's acceptivity been named as resignated in this applicationally with the provision accept the obligation. The name, title or captille or Capacity MGR	coral Gables (Cay) Itance: Inglistered agent and to accept service of pition, I hereby accept the appointment as tons of all statutes relative to the proper is of my postulan as registered agent. (Reduced agent's Hacity and address of the person(s) who has Name and Address internal agent agent and address. INTERLOCK DIRECTOR LTD. BUITS, 4. PROMPENT HOUSE HAMILUMO ST., ST PETER PORT GUERNSEY, GY1 2QE	register and con	for the above stated limited red agent and agree to act applets performance of my Preschient without to manage interest to or Canacity.	in this capacity. I further agree duties, and I am familiar with Name and Address:
egistared agent's acceptively been named as resignated in this applicationally with the provision accept the obligation. The name, title or captible or Capacity: MGR Jeo attachments if necestitations Attached is a certificato	coral Gables (Chy) Itance: Inglistered agent and to accept service of position, I hereby accept the appointment as the analysis of all statutes relative to the proper of my position as registered agent. (Required agent's the acity and address of the person(s) who has hame and Address INTERLOCK DIRECTOR LTD. BUTE, a PROMPENT HOUSE HAMILAND ST. ST PETER POINT GUERNSEY, GY1 2QE Sery) of existence, no more than 90 days old, d	registered con	for the above stated limited and agree to act applets performance of my Pressedient without to manage interest to or Canacity:	in this capacity. I further agree duties, and I am familiar with Name and Address:
egistared agent's acceptivity been named as resignated in this application of the provision of accept the obligation. The name, title or captilities of Capacity: MGR Jee attachments if necestity of the captilities of the capacity of th	coral Gables (Cay) Itance: Inglistered agent and to accept service of pition, I hereby accept the appointment as tons of all statutes relative to the proper is of my postulan as registered agent. (Reduced agent's Hacity and address of the person(s) who has Name and Address internal agent agent and address. INTERLOCK DIRECTOR LTD. BUITS, 4. PROMPENT HOUSE HAMILUMO ST., ST PETER PORT GUERNSEY, GY1 2QE	registered con many many many many many many many man	for the above stated limited red agent and agree to act applets performance of my process of the control of the	i liability company at the place in this capacity. I further agree duties, and I am familiar with Name and Address:
rgistured agent's acceptiving been named as resignated in this applica comply with the provision accept the obligation. The name, title of captilities are Capacity. MGR	coral Gables (Chy) stance: glistered agent and to accept service of prition, I hereby accept the appointment as the angle of all statutes relative to the proper is of my postilian as registered agent. (Registered agent's the acity and address of the person(s) who has name and Address INTERLOCK DIRECTOR LTD. BUT; A PROMPENT HOUSE HAMILAND ST. STPETER POWT GUERNSEY, GY1 2QE sery) of existence, no more than 90 theys old, do of which it is orgapized (if the cortificate	registered con many many many many many many many man	for the above stated limited red agent and agree to act applets performance of my process of the control of the	i liability company at the place in this capacity. I further agree duties, and I am familiar with Name and Address:

FAX AUDIT NO.: H17000122075 3

Delaware The First State

Page 1

al. pli

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

DELAWARE, DQ HEREBY CERTIFY "BROMPTON VILLAS 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 THIRD DAY OF MAY, A.D. 2017.

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



•

4894263 8300 SR# 20173042847

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

FAX AUDIT NO.: H17000122075 3

Jacks p. V. Ballack, Societary of Elite

Authentication: 202478001

Date: 05-03-17

Received Fax: May 03 2017 12:55PM Fax Station: Michael J. Freeman, P.A.

850-617-6381

5/8/2017 12:56:35 PM PAGE 1/001 Fax Server



May 8, 2017

FLORIDA DEPARTMENT OF STATE Division of Corporations

MICHAEL J. FREEMAN, P.A.

SUBJECT: BROMPTON VILLAS LLC

REF: W17000039272

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.

According to section 605.0902, Florida Statutes, the application for Certificate of Authority must be made on the forms prescribed and furnished by the Department of State. Therefore, your application is being returned and the correct form is enclosed.

Please 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.

Karen A Saly Regulatory Specialist II FAX Aud. #: H17000122075 Letter Number: 217A00009054