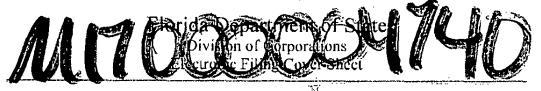
6/2/2017

Division of Corporations



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.

(((H17000149114 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

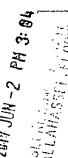
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

E 1.1	Addnoce			



Foreign Limited Liability Company HTA-Miami Dade Land, LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

D. SCOTT

re,

COVER LETTER

SUBJEC	HTA-Miami Dade I	Land, LLC					
Seinara	l. 1 f	Name of Limited Liability Company					
The enci	losed "Application by Fores, and check are submitte	eign Limited Liability Comp d to register the above refer	pany for Authorization to Tre enced foreign limited liability	ansact Business in Florid y company to transact bu	ia, "Certificate of siness in Florida		
Please re	eturn all correspondence o	concerning this matter to the	following:	. * * .			
	p)	N	nine of Person				
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	lindsaycdebaca@	•	tate and Zip Code				
	Enal referrances y quies incompanies analyses	,	d for future annual report not	ification)	一高年 3		
For furth	er information concerning	g this matter, please call:					
	Name o	f Contact Person	at () Area Code Day	time Telephone Number	 '		
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division Registrat T- Clifton B 2661 Exc	of Corporations ion Section ion Section idling centive Center Circle ice, FL 32301			
	is a check for the follow \$125,00 Filing Fee	ing amount: \$130.00 Filing Fee & Certificate of Status	□ \$155,00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, of Status & Certified (

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

	TITON 605.0902, FLORIDA STATT USINESS IN THE STATE OF FLOR		KUBMITTED TO REGISTER	A FOREIGN LIMITED LI	<i>ИВПЛТҮ</i>
HTA-Mianti Dade Lan	d, LLC		** ** **		
l +	ign Limited Liability Company	; must include "Limited List	pility Company," "L.L.C.,"	or "ELC.")	
Liability Company," "L.L.C,	Iternate name adopted for the pure or "LLC.")	pose of transacting business	s in Florida. The alternate i	name must include "Limite	≱d
2. Delaware		Applied For			• • •
	of which foreign limited liability	y	(FEI number, if applicab	ile)	
4. Upon registration					
1	(Date first transacted by	siness in Florida, if prior to	registration;)	 * * * * * * * * * * * * * * * * *	
5 . 16435 N. Scottsdale R	•	605.0905, P.S. to determine	- penalty Hability)		
5. 10433,14.0consquer	Clath, Stille, 320		. • <u></u>		<u> </u>
Scottsdale, AZ 85254	• •			٠	
2 16435 N. Scottsdale Ro		of Principal Office)			
6. 10435 N. Scousonie Re	544, Suite 320				
Scotisdale, AZ 85254				三 三	
	(Mail	ing Address)		上 经图 色	There
7. Name and street address	is of Florida registered agent:	(P.O. Box NOT accepts	able)		
Name:	CT Corporation System			言語で	, ¦m
ivalito;		, And	•		
Office Address:	1200 South Pine Island Roa	iu '	•	الدورة سسم	
	Plamation		; Florida 33324		
Registered agent's necep	(City)	(Zip code):	900 2	និ
Having been named as re designated in this applica to complywith the provisi	gistered agent and to accept tion, I hereby accept the app ons of all statutes relative to ny position as registered age	ointment as registered ag the proper and complete	gent and agree to act in performance of my dutients	this capacity. I further	agree .
	(Re	gistered agent's signature)		A Committee of the Comm	
8. The name, title or caps	city, and address of the person	n(s) who has/have authori	ty to manage is/are:		
	ica Holdings, LP - sole memb	* *	.*	•	
16435 N. Scottsdale Roa	d, Suite 320				
Scottsdale, AZ 85254	· · · · · · · · · · · · · · · · · · ·	and the second second			
	1/10		n lánguage, a translátion		
This document is executed submitted in a document to	in accordance with section 66 the Department of State cons	stitutes à third degree felo	ny as provided for in s.8	ny false information 17.155, F.S.	
	Robert Milligan, Authorized	Signatory/CFO of Sole N	Member		

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 "HTA-MIAMI DADE LAND, 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 SECOND DAY OF JUNE, A.D. 2017.

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

FILEU

STORETARY OF STATE

6429801 8300

SR# 20174547304

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

Juffrey W. Buffeen, Sacretary of State

Authentication: 202640426

Date: 06-02-17