## M170000004836

- (5)						
(Reque	estor's Name)					
(Addre	ss)					
(Addre	:ss)					
(City/State/Zip/Phone #)						
	_					
PICK-UP	WAIT	MAIL				
(Busin	ess Entity Nar	ne)				
(Document Number)						
Certified Copies	Certificates	s of Status				
Special Instructions to Filing Officer:						
_						
W1-420	165					
T 0.	(A)					

Office Use Only



600299352226

05/18/17--01009--030 \*\*125.00

ALLAHASSEE, FLORID

S. WARREN JUN 0 7 2017



May 19, 2017

DEBRA ROBERTS FROST BROWN TODD LLC 301 E FOURTH STREET STE 3300 CINCINNATI, OH 45202

SUBJECT: SEA INVESTMENT PROPERTIES, LLC

Ref. Number: W17000042965

We have received your document for SEA INVESTMENT PROPERTIES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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.

Shelia H Young Regulatory Specialist II

Letter Number: 817A00010144



Debra C. Roberts Senior Paralegal 513.651.6114 (t) 513.651.6981 (f) DRoberts@fbtlaw.com

June 2, 2017

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Filing Application by Foreign Limited Liability Company for Authorization to Transact

Business in Florida for Sea Investment Properties, LLC

Dear Sir or Madam:

Per your letter dated May 19, 2017 (copy enclosed), I have enclosed a revised Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida ("Application") for Sea Investment Properties, LLC (the "Company").

Please endorse your approval of the Application for the Company and return a file-stamped copy to my attention at the address listed below.

If you have any questions concerning this matter, please contact me. Thank you for your prompt attention to this matter.

Sincerely,

Debra C. Roberts

OSBA Certified Paralegal

Debra C. Woods

Enclosures

cc: J. Aaron Byrd, Esq.

0135293.0643443 4826-6320-3402v1



Debra C. Roberts
Senior Paralegal
513.651.6114 (t)
513.651.6981 (f)
DRoberts@fbtlaw.com

May 12, 2017

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Filing Application by Foreign Limited Liability Company for Authorization to Transact

Business in Florida for Sea Investment Properties, LLC

Dear Sir or Madam:

I have enclosed a cover letter along with the executed Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida ("Application") for Sea Investment Properties, LLC (the "Company") and Certificate of Existence. Also enclosed is a check made payable to the Florida Department of State in the amount of \$125.00 representing the appropriate filing fee.

Please endorse your approval of the Application for the Company and return a file-stamped copy to my attention at the address listed below.

If you have any questions concerning this matter, please contact me. Thank you for your prompt attention to this matter.

Sincerely,

Debra C. Roberts

**OSBA** Certified Paralegal

-Delna ( Wobert

Enclosures

ee: J. Aaron Byrd, Esq.

0135293.0643443 4843-5478-9704v1

## COVER LETTER

SUBJECT:	Sea Investment Pro	perties, LLC					
SOBJECT.	Name of Limited Liability Company						
					ansact Business in Florida," Cer y company to transact business		
Please retur	n all correspondence	concerning this matter to the	following:				
	Debra Roberts						
	Name of Person						
	Frost Brown Todd LLC						
	Firm/Company						
	301 E. Fourth Street, Suite 3300						
	Address						
	Cincinnati, OH 45202						
		City/S	tate and Zip Code				
	droberts@fbtlaw						
		E-mail address: (to be used	d for future annual	report not	ification)		
For further i	nformation concernin	g this matter, please call:					
De	bra Roberts		513 at (	651-61			
	Name o	of 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 Tallahassee, FL 32301					
	a check for the follow \$125.00 Filing Fee	ring amount:  \$\square\$\square\$ \$\square\$ \$130.00 \text{ Filing Fcc & Certificate of Status}\$	☐ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certified Copy	icate	

## 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 Sca Investment Properties, 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. Ohio (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability 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) 3175 Legacy Trace Cincinnati, OH 45237 (Street Address of Principal Office) 3175 Legacy Trace Cincinnati, OH 45237 (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 (City) 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. C T Corporation System Max Bode 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: Jamie L. Cusick - 3175 Legacy Trace, Cincinnati, OH 45237, as Manager

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 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.

Typed or printed name of signee OFFICEY

## UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show SEA INVESTMENT PROPERTIES, LLC, an Ohio For Profit Limited Liability Company, Registration Number 2444547, was organized within the State of Ohio on November 10, 2015, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 12th day of May, A.D. 2017.

Ohio Secretary of State

Jon Hastel

Validation Number: 201713202020