

117000005345

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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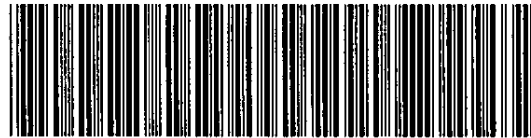
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS

O SIMMONS

JUN 23 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 2901 EAST LAS OLAS, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

BENJAMIN E. OLIVE

Name of Person

HACKLEMAN, OLIVE & JUDD, P.A.

Firm/Company

2426 E. LAS OLAS BLVD

Address

FORT LAUDERDALE, FL 33301

City/State and Zip Code

BOLIVE@HOJLAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BENJAMIN E. OLIVE

954

334-2250

Name of Contact Person

at (_____) _____

Area Code

Daytime 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

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$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 FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. 2901 EAST LAS OLAS, 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," "LLC," or "L.L.C.")

2. DELAWARE 3. 81-4815783
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 05/01/2017
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 2901 E. Las Olas Blvd 6. 2426 E. Las Olas Blvd
(Street Address of Principal Office) (Mailing Address)
Fort Lauderdale, FL 33316 Fort Lauderdale, FL 33301

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Hackleman, Olive & Judd, P.A.
Office Address: 2426 E. Las Olas Blvd
Fort Lauderdale, Florida 33301
(City) (Zip code)

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 comply with 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:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Manager</u>	<u>Museum One, LLC</u> <u>2426 E. Las Olas Blvd</u> <u>Fort Lauderdale, FL 33301</u>	<u>Manager</u>	<u>Epic Equity Holdings, LLC</u> <u>2426 E. Las Olas Blvd</u> <u>Fort Lauderdale, FL 33301</u>
<u>Manager</u>	<u>Northern Gold, LLC</u> <u>888 SE 3rd Avenue, Suite 500</u> <u>Fort Lauderdale, FL 33316</u>		

(Use attachments if necessary)

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)

10. 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)

Benjamin E. Olive

Typed or printed name of signee

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Delaware

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "2901 EAST LAS OLAS, 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 SIXTEENTH DAY OF JUNE, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "2901 EAST LAS OLAS, LLC" WAS FORMED ON THE FIFTH DAY OF DECEMBER, A.D. 2016.




Jeffrey W. Bullock, Secretary of State

6239752 8300

SR# 20174777550

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

Authentication: 202721298

Date: 06-16-17