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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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## **COVER LETTER**

TO: Registration Section

**Division of Corporations** 

SUBJECT:	110 Key LLC					
		Name of L	Limited Liability C	Company		_
		gn Limited Liability Compa to register the above refere				
Please return	all correspondence cor	ncerning this matter to the f	following:			
	Bradley S Weiss					
		Na	me of Person		***	<del></del>
	PBF 110 Key Gei	npar				
		Fir	n/Company			
	2 South Universit	y Drive Suite 325				
			Address	<del></del>		
	Plantation, FL 33.	324				
		City/St	ate and Zip Code		<del></del>	_
	Bradley.Weiss@gr	ovegate.com				F 855
For further in	nformation concerning t	E-mail address: (to be used this matter, please call:	for future annual	report not	ification)	
Bra	dley Weiss		954 at (	380-840	00	FILED ME 18 FB MESSELLE
	Name of 6	Contact Person	Area Code	Day	time Telephone Numbe	
Div Reg P.O	ision of Corporations gistration Section b. Box 6327 lahassee, FL 32314			Division of Registrati Clifton Bi 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee. FL 32301	24
		g amount: □ \$130.00 Filing Fee & Certificate of Status	S155.00 Filir Certified Copy	ig Fee &	☐ \$160.00 Filing Fee of Status & Certified	

## 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:

name unavailable, enter alternate :	name adopted for the purpose of transacting business in Flori	da. The alternate name must include "Limited I	Liability Company," "L.L C,"	or "LLC.")
Delaware		3 35-2521079		
	hich foreign limited liability company is organized)	(FEI nu	imber, if applicable)	
01/01/2017				
	(Date first transacted business in Florida, if prior to in (See sections 605,0904 & 605,0905, F.S. to determine	rgistration )		
2 South University Dr		6 2 South University Drive		
(Street Address of		6. (Mailing A		
Suite 325		Suite 325	<u> </u>	7_
Plantation, FL 33324		Plantation, FL 33324	:-::	_
			装頭	7
Name and street addre	ss of Florida registered agent: (P.O. Box	NOT acceptable)	garan Farra	8 [
	Neale J. Poller, Esquire			-D =
Name:	, realest Forter, Esquire		<u> </u>	
Office Address:	3.0 1.01 1.01 0.1 0.1 0.5			
Office Address:	2 South University Drive Suite 325	<del></del>	<u> </u>	ယ္
Office Address:	<del>-</del>		E ST	3: 24
egistered agent's acce aving been named as r signated in this applice comply with the provis	Plantation (City)	registered agent and agree to a	ed liability company ct in this capacity. I	e at the p. further
egistered agent's acceplaying been named as resignated in this applicated comply with the provis	Plantation  (City)  otance:  egistered agent and to accept service of p  tition, I hereby accept the appointment as  ions of all statutes relative to the proper  is of my position as registered agent.	rocess for the above stated limit registered agent and agree to a and complete performance of m	ed liability company ct in this capacity. I	e at the p. further
egistered agent's acce aving been named as resignated in this applica comply with the provised ad accept the obligation	Plantation  (City)  otance:  egistered agent and to accept service of p  tion, I hereby accept the appointment as  ions of all statutes relative to the proper  is of my position as registered agent.  (Regstered agent's s	rocess for the above stated limit registered agent and agree to a and complete performance of m	ed liability company ct in this capacity. I ty duties, and I am fo	e at the p. further
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Typed or printed name of signee



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "110 KEY 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 THIRTEENTH DAY OF JULY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "110 KEY LLC" WAS FORMED ON THE TWENTIETH DAY OF NOVEMBER, A.D. 2014.

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

Authentication: 202880763

Date: 07-13-17

5643766 8300 SR# 20175227599