## 111000006191

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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 735620 4303929

AUTHORIZATION : Sinelle & a

COST LIMIT : (\$\155.00

ORDER DATE : July 21, 2017

ORDER TIME : 12:13 PM

ORDER NO. : 735620-005

CUSTOMER NO: 4303929

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## FOREIGN FILINGS

NAME: GAZIT HORIZONS (BRICKELL) LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XXX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

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

IN COMPILANCE WITH SECTION @5,002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FÖREIGN TIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Gazit Horizons (Bric	kell) LLC			
(Name of Fore	ign Limited Liability Company; must inc	clude "Limited Liabilit	y Company." "L.L.C." o	r "LLC.")
H'name unavailable enter ali	ternate name adopted for the purpose of	transacting business in	Florida. The alternate no	une must include "Limited
liability Company," "L.L.C."	or "LLC.")			
Delaware		3. <u>82-2144781</u>		·
company is organized)	of which foreign limited liability	(	FEI number, il applicabl	e)
4. Upon qualification				<del>_</del>
	(Date first transacted business in (See sections 605,0904 & 605,090)	i Florida, il prior to reg 5, F.S. to determine pe	nalty liability)	
5. 1696 NE Miami Garde	ns Drive, North Miami Beach, Florid	da 33179		_
<del></del>	(Street Address of Princ	rinal Office)		
. 1696 NF Miami Garder	ns Drive, North Miami Beach, Florid	•		
5			·	<del>_</del>
	(Mailing Add	ress)	<u> </u>	
7. Name and street addres	s of Florida registered agent: (P.O. I	Box <u>NOT</u> acceptabl	e)	
Name:	Corporation Service Company			
Office Address:	1201 Hays Street			
	Tallahassee		Florida 32301 (Zip code)	
	(City)		(Zip code)	_
designated in this applica to complywith the provision	gistered agent and to accept service tion. I hereby accept the appointme ons of all statutes relative to the pro my position as registered agent.  (Registroe	nt as registered agei	it and agree to act in i	this capacity. I further agree
2. The name title or can:	acity and address of the person(s) wh	io has/have authority	to manage is/are:	13 省市
MGM Gazit Horizons,		<u>.</u>		2 - 2
1696 NE Miam	i Gardens Drive, North Miami Beach	h, Florida 33179		
9. Attached is a certificate jurisdiction under the law of the translator must be st	lelerai	ficate is in a foreign	ed by the official havin language, a translation	g custody of records in the of the certificate under oath
	· ·	an authorized person		
This document is executed submitted in a document to	f in accordance with section 605,020 the Department of State constitutes	a third degree felony	tutes. I am aware that a sas provided for in s.8	iny false information 17.155, F.S.
	<ul> <li>Debra Palmisano, Authorized Re</li> </ul>	epresentative		

Typed or printed name of signee



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

DELAWARE, DO HEREBY CERTIFY "GAZIT HORIZONS (BRICKELL) 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 TWENTY-FIRST DAY OF JULY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GAZIT HORIZONS"

(BRICKELL) LLC" WAS FORMED ON THE TWELFTH DAY OF JULY, A.D. 2017.

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





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Authentication: 202926278

Date: 07-21-17