

# M17000006215

Florida Department of State  
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To: Division of Corporations  
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From: Account Name : CAPITOL SERVICES, INC.  
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Phone : (800) 345-4647  
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Foreign Limited Liability Company  
SMI MIAMI BEACH GP, LLC

Certificate of Status	0
Certified Copy	1
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K. SALY

JUL 24 2017



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**Subject:**

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: SMI MIAMI BEACH GP, 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:

CHRISTINA T. RODRIGUEZ  
Name of Person

HAYNES AND BOONE, LLP  
Firm/Company

2323 VICTORY AVENUE, SUITE 700  
Address

DALLAS, TEXAS 75219  
City/State and Zip Code

BSTENSRUD@SUNTEX.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRUCKER STENSRUD at ( 972 ) 789.1400  
Name of Contact Person 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. SMI MIAMI BEACH GP, 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. DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)

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

5. 17330 PRESTON ROAD, SUITE 220A DALLAS, TEXAS 75252 (Street Address of Principal Office)

6. 17330 PRESTON ROAD, SUITE 220A DALLAS, TEXAS 75252 (Mailing Address)

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

Name: CORPORATION SERVICE COMPANY Office Address: 1201 HAYS STREET TALLAHASSEE, Florida 32301 (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) Robert O'Byrne Vice President

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

JOHN D. POWERS, JR., PRESIDENT, 17330 PRESTON ROAD, SUITE 220A, DALLAS, TEXAS 75252 BRYAN C. REDMOND, VP/SECRETARY, 17330 PRESTON ROAD, SUITE 220A, DALLAS, TEXAS 75252

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 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.

BRYAN C. REDMOND, VICE PRESIDENT Typed or printed name of signee

16429059

FILED 2011 JUL 21 PM 12:19 DEPARTMENT OF STATE TALLAHASSEE, FLORIDA

# Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SMI MIAMI BEACH GP, 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 NINETEENTH DAY OF JULY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SMI MIAMI BEACH GP, LLC" WAS FORMED ON THE TENTH DAY OF MAY, A.D. 2017.

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

FILED  
2017 JUL 21 PM 12:19  
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TALLAHASSEE, FLORIDA



*Jeffrey W. Bullock*  
Jeffrey W. Bullock, Secretary of State

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You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

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