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(Re	questor's Name)	
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer.	
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D. SCOTT AUG 4 2017 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

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	ACCOUNT NO.	:	120000000	195		
	REFERENCE	:	753686	7495878		
	AUTHORIZATION	I	The a	-		
	COST LIMIT	K	\$ 125.00	en		
ORDER DATE :	August 3, 2017					-
ORDER TIME :	3:14 PM					
ORDER NO. :	753686-005					
CUSTOMER NO:	7495878					
						- -
	FOREIGN F	ILIN	IGS		ω. 	LED
NAME :	BR CITRUS TOW	ÉR,	LLC		11 8 03)

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XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XX
 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 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 BR Citrus Tower, LLC

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name univaluitie, enter alternate n	ame adopted for the purpose of transacting business in Flo	rida. The alternate name must include "Limited Liability Company," "L.L.C," or "L
DELAWARE		3.
	hich foreign limited liability company is organized)	(FEI number, if applicable)
UPON FILING		
01000100000	(Date first transacted business in Florida, if prior to	re mistration
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	ine penalty liability)
27777 Franklin Road,		6. 27777 Franklin Road, Suite 900
(Street Address of I	rincipal Office)	(Mailing Address)
Southfield, MI 48034		Southfield, MI 48034
Name:	Corporation Service Company	
Office Address:	1201 Hays Street	
	Tallahassee	, Florida <u>32301</u>
	(City)	, riorida(Zip code)
egistered agent's accep	tance:	(7.ip code)
aving been named as re	tance: gistered agent and to accept service of j	(Tip code)
aving been named as re signated in this applica	tance: gistered agent and to accept service of j tion, I hereby accept the appointment a	(Tip code) process for the above stated limited liability company at t s registered agent and agree to act in this capacity. I fur
aving been named as re signated in this applica comply with the provisi	tance: gistered agent and to accept service of j tion, I hereby accept the appointment a ons of all statutes relative to the proper	(Tip code)
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(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.

(in	,
	Signature of an authorized person
Christopher Vohs	

Typed or printed name of signee

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BR CITRUS TOWER, 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 THIRD DAY OF AUGUST, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BR CITRUS TOWER, LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF JUNE, A.D. 2017.

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

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Page 1



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

Jeffrey W. Bul ch, Secretary of State

Authentication: 202998068

Date: 08-03-17