

9/15/2017

Division of Corporations

M1700007934

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6383

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Foreign Limited Liability Company  
KCP Harkins Manager, L.L.C

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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D SCOTT  
SEP 19 2017

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: KCP Markins Manager, 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:

Christine Oconnor

Name of Person

NRAI Svcs

Firm/Company

900 Merchants Concourse Ste 405

Address

Westbury, NY 11590

City/State and Zip Code

krstina@kawa.com

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

For further information concerning this matter, please call:

christine.oconnor	388	379-0286
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

17 SEP 15 AM 8:45  
 RECEIVED  
 DIVISION OF CORPORATIONS  
 TALLAHASSEE, FL 32301

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANACT BUSINESS IN THE STATE OF FLORIDA:

1. KCP Herkha Manager, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")

(If name available, select state to name company for the purpose of transacting business in Florida. The state is same from below "Limited Liability Company," "LLC," or "LLC.")

2. Delaware (Jurisdiction under the laws of which foreign limited liability company is organized) 3. (P.E. number, if applicable)

4. (Date first transacted business in Florida, if prior to registration) (See sections 601.2924 & 601.2903, F.S. to determine penalty liability)

5. 21500 Biscayne Blvd Suite 700 Aventura, FL 33180 (Street Address of Principal Office) 6. 21500 Biscayne Blvd Suite 700 Aventura, FL 33180 (Mailing Address)

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

Name: NRAI Services, Inc. Office Address: 1200 South Pine Island Road Plantation, Florida 33324 (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.

By: NRAI Services Inc. (Registered agent's signature)

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

Table with 4 columns: Title or Capacity, Name and Address, Title or Capacity, Name and Address. Includes entries for Daniel Ades, Cristina Baldim, Alexandre Saverin, Carlos Felipe Lemos, and Jeremy Traster.

(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)

Signature of an authorized person

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.

Daniel Ades (Typed or printed name of signor)

17 SEP 15 AM 8:43

Manager: Daniel Ades 21500 Biscayne Blvd Ste 700, Aventura, FL 33180  
Authorized Signatory: Alexandre Saverin, 21500 Biscayne Blvd Ste 700, Aventura, FL 33180  
Authorized Signatory: Cristina Baldim, 21500 Biscayne Blvd Ste 700, Aventura, FL 33180  
Authorized Signatory: Carlos Felipe Lemos, 21500 Biscayne Blvd Ste 700, Aventura FL 33180  
Authorized Signatory: Jeremy Traster, 21500 Biscayne Blvd, Ste 700, Aventura, FL 33180

17 SEP 15 PM 8:43  
MILWAUKEE, WI  
MILWAUKEE, WI

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KCP HARKINS MANAGER, 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 FIRST DAY OF SEPTEMBER, A.D. 2017.

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

17 SEP 15 PM 8:43  
DELAWARE SECRETARY OF STATE



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

6527484 8300  
SR# 20175995794  
You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

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Date: 09-01-17



September 18, 2017

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

C T CORPORATION

SUBJECT: KCP HARKINS MANAGER, LLC  
REF: W17000074410

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Dionne M Pijoux  
Regulatory Specialist

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Letter Number: 617A00018896

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