# 17000008836

Office Use Only



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FILED 17 001 17 AM 9: 07

S. WARREN OCT 1 8 2017

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 854663 8035779

AUTHORIZATION

COST LIMIT :(/\$ 125.00

ORDER DATE: October 10, 2017

ORDER TIME : 3:41 PM

ORDER NO. : 854663-005

CUSTOMER NO: 8035779

### FOREIGN FILINGS

NAME: REVA KAY TAMPA IBC I, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XXX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

## COVER LETTER

**Registration Section** 

Division of Corporations

TO:

		Name of	Limited Liability (	Company	
closed ". ice, and	Application by For check are submitte	eign Limited Liability Com d to register the above refer	pany for Authoriza enced foreign limit	tion to Tra ed liability	ansact Business in Florida." Certi y company to transact business in
return al	l correspondence o	concerning this matter to the	following:		
	Stevens M. Sac	ller			
		N	ame of Person		
	Real Estate Va	ue Advisors, LLC			
		F	irm/Company		
	5540 Falmouth	Street, Suite 302			
	<u> </u>		Address		
	Richmond, VA	23230			
	<del></del>	City/S	State and Zip Code		
	jm@allegiancy.t	ıs			
		E-mail address: (to be use	d for future annual	report not	tification)
ther info	ormation concerning	g this matter, please call:			
JM R	amey		804 at (	208-09	97
	Name o	of Contact Person	Area Code	_/Day	rtime Telephone Number
Divisi Regist P.O. E	on of Corporations tration Section Box 6327 trassee, FL 32314			Division Registrat Clifton B 2661 Exc	F ADDRESS: of Corporations ion Section duilding ecutive Center Circle see, FL 32301
	heck for the follow 25.00 Filing Fee	ring amount:  \$\Boxed{\Omega} \\$130.00 \text{ Filing Fee & Certificate of Status}	□ \$155.00 Filir Certified Copy	ig Fee &	☐ \$160.00 Filing Fee, Certific of Status & Certified Copy

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

IN COMPILANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	iame adopted for the purpo:	se of transacting business in l	Florida The alterna	te name must include "Limited i	Liability Company," "I	. L.C," or "LLC.")
Delaware			3			
(Jurisdiction under the law of w	hich foreign limited liability	y company is organized)		(FEI m.	umber, if applicable)	
October 10, 2017	(Duri East town astron	dharan a Vlanda Jane	In remetation 1			
		d business in Florida, if prior 204 & 605 0905, F.S. to deter	mine penalty habih	ry)		
5540 Falmouth Street, (Street Address of		•	6. <u>sar</u>	ne (Mailing A	(ddress)	
Richmond, VA 23230					· · · · · · · · · · · · · · · · · · ·	
7. Name and street addre	ss of Florida registe	ered agent: (P.O. Bo	ox <u>NOT</u> acce	ptable)		17
Name:	Corporation Serv	vice Company			2 mars (2) (2) 10 mars (2)	. 0CT
Office Address:	1201 Hays Street	t	····	<del></del>	H.S.	1
	Tallahassee			, Florida 32301	<u> </u>	. 꽃 🖯
Having been named as relesignated in this application	ition, I hereby acce	ept the appointment	as registered	agent and agree to a	ct in this cupuc	ity. I further i
Having been named as releasing teel in this application of comply with the provising accept the obligation	egistered agent and tion. I hereby acci ions of all statutes is of my position as	ept the appointment relative to the prop s registered agent. rvice Company	as registered er and compl	agent and agree to a	ct in this capuc ny duties, and I R	ity. I further i
lesignated in this applica o comply with the provis	egistered agent and attion. I hereby account to the statutes as of my position as Corporation Set By:	ept the appointment relative to the propose registered agent.  rvice Company stered agent.	as registered er and compl (8 signature) has/have auth	agent and agree to a etc performance of m	et in this c <del>ap</del> ac ly duties, and I R Ass	ity. I further of am familiar wood oxanne Turest. Vice Pres
lesignated in this applica o comply with the provis and accept the obligation 8. The name, title or cap	egistered agent and attion. I hereby accessions of all statutes as of my position as Corporation Ser By:  acity and address of Name a Stevens 5540 Fah	ept the appointment relative to the propose registered agent.  rvice Company stered agent.	er and complete an	agent and agree to a etc performance of m	ect in this captuc ny duties, and I R Ass	ity. I further of am familiar wood oxanne Turest. Vice Pres
lesignated in this applicate of comply with the provisional accept the obligation accept the name, title or cap  Title or Capacity:	egistered agent and attion. I hereby accessions of all statutes as of my position as Corporation Ser By:  acity and address of Name a Stevens 5540 Fah	relative to the propose registered agent. rvice Company stered agent of the person(s) who and Address: M. Sadler mouth Street Suite 302	er and complete an	agent and agree to a etc performance of m	ect in this captuc ny duties, and I R Ass	ity. I further of am familiar wood oxanne Turest. Vice Pres
lesignated in this applicate ocomply with the provisional accept the obligation of the same, title or caparity:  Manager	egistered agent and attion. I hereby accessions of all statutes as of my position as Corporation Ser By:  acity and address of Name a Stevens  5540 Fah Richmon	relative to the propose registered agent. rvice Company stered agent of the person(s) who and Address: M. Sadler mouth Street Suite 302	er and complete an	agent and agree to a etc performance of m	ect in this captuc ny duties, and I R Ass	ity. I further of am familiar wood oxanne Turest. Vice Pres
lesignated in this applicate of comply with the provisional accept the obligation accept the name, title or cap  Title or Capacity:	egistered agent and attion. I hereby accessions of all statutes as of my position as Corporation Ser By:  acity and address of Name a Stevens 5540 Fah Richmon	ept the appointment relative to the propose registered agent.  rvice Company stered agent of the person(s) who and Address:  M. Sadler mouth Street Suite 302 and VA 23230	as registered er and complete signature) has/have auth Title of	agent and agree to a ete performance of meter performance of meter performance of meters or to manage is/are or Capacity:	net in this capue  y duties, and I  R Ass  Name and	ity. I further of am familiar working Turnst. Vice Pres
lesignated in this applicate of comply with the provisuand accept the obligation.  8. The name, title or cap Title or Capacity:  Manager  (Use attachments if necessor, Attached is a certificate urisdiction under the law).	egistered agent and attion. I hereby accessions of all statutes as of my position as Corporation Ser By:  acity and address o Name a Stevens 5540 Fah Richmon of which it is organubmitted)	of the person(s) who and Address:  M. Sadler mouth Street Suite 302 ad VA 23230  more than 90 days old nized. (If the certific e with section 605.02	t, duly authen ate is in a fore	ticated by the official eign language, a transl	having custody lation of the cert	oxanne Turst. Vice Pres  Address:  of records in the tificate under consecution.

Typed or printed name of signee

Page 1

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "REVA KAY TAMPA IBC1, 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 SEVENTEENTH DAY OF OCTOBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "REVA KAY TAMPA"

IBC1, LLC" WAS FORMED ON THE NINTH DAY OF OCTOBER, A.D. 2017.

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

6573767 8300

SR# 20176656303

Authentication: 203411639

Date: 10-17-17