/0003 F-0 Division of Corporations Electronic Filing Cover Sheet Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document. (((H17000303093 3))) H170003030933ABC-Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : RENNERT, VOGEL, MANDLER & RODRIGUEZ, P.A, Account Number : 076103002011 : (305)423-3556 Phone Fax Number : (305) 533-1594 \*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\* Email Address: Foreign Limited Liability Company Magic City Properties XXV, LLC **Lil NON LID** Certificate of Status Û TI 1 Certified Copy AL. 01 Page Count 3. ZBI7 HOV I 7 \$155.00 AH II: Estimated Charge m . .7 2 Corporate Filing Menu Electronic Filing Menu Help

## FAX AUDIT NO: H17000303093 3 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:

Magic City Properties XXV, LLC 1

(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<br>Jurisdiction under the law     | of which foreign limited liability  | (FEI number, if applicable)  |                |
|----|--|---|------------------------------|----------------|
| 4. | company is organized)<br>November 16, 2017 | (Date first transacted business in Florida,   | if prior to registration.)   |                |
| 5. | 1 SB 3rd Avenue, Ste.                      | (Date first transacted business in Florida,<br>(See sections 605.0904 & 605.0905, P.S. to<br>2110 | determine penalty liability) | THIN THE T     |
| 2. | Miami, Florida 33133                       | (Street Address of Principal Off  |                              | L'ATTA         |
| 6. | 1 SE 3rd Avenue, Ste. 2                    |   |                              | S.W - 111      |
|    | Miami, Plorida 33133                       | (Muiling Address)   | ·                            | E. FL          |
| 7. | Name and street addres                     | s of Florida registered agent: (P.O. Box NC   | ) <u>T</u> acceptable)       | ORIDA<br>ORIDA |
|    | Name:                                      | George L. Helmstetter   |                              | -              |
|    | Office Address:                            | 1 SE 3rd Avenue, Ste. 2110  |                              |                |
|    |  | Miami   | , Florida                    |                |
|    |  | (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.



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

| AR - Heimstetter, George L. | - | 1 SE 3rd Avenue, Ste. 2110, Miami, Florida 33131 |
|-----------------------------|---|--|
| AR - Bums, Anthony          |   | 1 SE 3rd Avenue, Ste. 2110, Miami, Plorida 33131 |
| AR - Fairman, Neil          | - | 1 SE 3rd Avenus, Ste. 2110, Miami, Florida 33131 |

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)

1. \* 1 л°,

Signature of an 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.

George L. Helmstetter, Authorized Representative

Typed or printed name of signes

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Delaware

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MAGIC CITY PROPERTIES XXV, 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 SIXTEENTH DAY OF NOVEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WAGIC CITY PROPERTIES XXV, LLC" WAS FORMED ON THE SIXTEENTH DAY OF NOVEMBER, A.D. 2017.

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FILED



Authentication: 203584264 Date: 11-16-17

6619327 8300

SR# 20177122920 You may verify this certificate online at corp.dclaware.gov/authver.shtml

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