# M12000010224

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
W17-94400					

Office Use Only



900305755509

17. NOV 20 AN 10: 41

\* NoV-28 AH 8: 49

DEC 0 6 2017
Y SULKER

929651-10



## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 29, 2017

CORPORATION SERVICE COMPANY

SUBJECT: AMFP IV VINING LLC Ref. Number: W17000094400 RESUBMIT
Please give original

submission date as file date.

Letter Number: 417A00024004

We have received your document for AMFP IV VINING LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 929651 4302355

AUTHORIZATION : THE ROLL OF THE PARTY OF THE

COST LIMIT : \$\frac{1}{2}5.00

ORDER DATE: November 27, 2017

ORDER TIME : 9:36 AM

ORDER NO. : 929651-010

CUSTOMER NO: 4302355

# FOREIGN FILINGS

NAME: AMFP IV VININGS LLC

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:

### COVER LETTER

TO:

то:	Registration Section Division of Corporation	ıs					
SUBJI	AMFP IV VINING	S LLC					
.,(01301	BC1	Name of	Limited Liability (	Company			
		reign Limited Liability Comp d to register the above refer					
Please	return all correspondence of	concerning this matter to the	following:				
	Michael Aidek	man					
	<del></del>	N'	ame of Person				
	Abacus Capital	Group					
	Firm/Company						
	420 Lexington	420 Lexington Avenue, Suite 2821					
		Address					
	New York, NY	10170					
		City/S	tate and Zip Code				
	maidekman@aba	acuscapitalgroup.com					
		E-mail address: (to be use	d for future annual	report not	tification)		
For fur	ther information concerning	g this matter, please call:					
	Michael Aidekman		646 at (	291-60	12		
	Name o	of Contact Person	Area Code	Day	time Telephone Number		
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton B 2661 Exc	of Corporations ion Section suilding centive Center Circle see, FL 32301		
Enclos	ed is a check for the follow  ☐ \$125.00 Filing Fee	ing amount:  \$\Bigsim \\$130.00 \text{Filing Fee & Certificate of Status}\$	□ \$155.00 Filir Certified Copy	ig Fee &	☐ \$160.00 Filing Fee, Co of Status & Certified Cop		

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

IN COMPLANCE WITH SECTION 605 0902, FLORIDA STATUTEX, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

L. AMFP IV VININGS L			
(Name of Ford	rign Limited Liability Company; must include "Limited	Liability Company," "L.L.C.," or	"LLC.")
Liability Company," "L.L.C,"	ternate name adopted for the purpose of transacting bus	siness in Florida. The alternate nan	ne must include "Limited
2. Delaware	3.		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable	
1			_
	(Date first transacted business in Florida, if pri (See sections 605.0904 & 605.0905, F.S. to deter	or to registration.) mine penalty liability)	
1000 Palm Place Drive			_
Palm Bay, Florida 329	05		
	(Street Address of Principal Office)	<del></del>	-
6. c/o Abacus Capital Gro	oup 420 Lexington Avenue, Suite 2821		_
New York, New York			
<del>.</del> .	(Mailing Address)		-
7. Name and street address	s of Florida registered agent: (P.O. Box <u>NOT</u> acc	ceptable)	<i>₹</i>
Name;	Corporation Service Company		<u>0</u>
Office Address:	1201 Hays Street		7 NOV-928 AH 8: 4
	Tallahassee	, Florida 32301	And the second s
	(City)	(Zip code)	
Registered agent's accep			. 40
	gistered agent and to accept service of process fo		
tesignated in this applica o complewith the provisi	tion, I hereby accept the appointment as registere ons of all statutes relative to the proper and comp	ed agent and agree to act in the	is capacity. I further agree Tueldom familiar with a
o comply kill the provisi accept the obligations of a	my position as registered agent,		
	ny position as registered agent. Corporation Service Company	Asst. Vice	President
	By: KLYMUL CULI	<u>ull</u>	_
	(Registered agent's signati	are)	
8. The name, title or capa	acity and address of the person(s) who has/have au	thority to manage is/are:	
Benjamin L. Fried	man, Managing Member		
c/o Abacus Capital (	Group, 420 Lexington Ave., Suite 2821, No	ew York, NY 10170	
·			
). Attached is a certificate	of existence, no more than 90 days old, duly authe	enticated by the official having	custody of records in the
urisdiction under the law	of which it is organized. (If the certificate is in a fo	oreign language, a translation o	f the certificate under oath
of the translator must be su	ubmitted)		
	<i>:////</i>		
	Signature of an authorized po	erson	-
	in accordance with section 605.0203 (1) (b), Flori		
ubmitted in a document to	the Department of State constitutes a third degree	telony as provided for in s.817	.155, F.S.
	Michael Aidekman		

Typed or printed name of signee





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

DELAWARE, DO HEREBY CERTIFY "AMFP IV VININGS 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 TWENTY-SEVENTH DAY OF NOVEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AMFP IV VININGS LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF NOVEMBER, A.D. 2017.

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

Authentication: 203633133

Date: 11-27-17