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

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

(Name of Foreign )	Cunited Liebility Company; must include "Limiter	Liability Company," "LLC.," or "LLC.")	
nome unavailable, enter alternate re	me adopted for the purpose of transacting business in Flor	ide. The elemets none must include "Limited Liability Corpany," "L.L.C	," ar "1.U
Delaware	ich foreign littuied Liblidty company is ofganazid)	3 (rel antier, if epplicible)	
	ick meiði lötnet molet) cengany a dífstarnik		
December 2017	(Date first managated billings in Florida, if prior to (See sectors 605,0004 & 605.0905, F.S. to determine	registra (xon. )	
		• -	
4770 Biscayne Bivd, S	necipal Office)	. 5. 4770 Biscayne Blvd, Stúte 1400	
Miami, FL 33137	·	Miami, FL 33137	
. Name and <u>street addres</u>	is of Florida registered agent: (P.O. Box	NOT acceptable)	
Name:	Galbut, Walters & Associates LLP		
• • • • • • • • • • • • • • • • • • • •	Galbut, Walters & Associates LLP 4770 Biscayne Blvd, Suite 1400		
Name: Offic <del>e</del> Address:			
Office Address:	4770 Biscayne Blvd, Suite 1400 Miani (City)	Florida 33137 (Zocode)	nv af L
Office Address: Registered agent's acceptaving been named as ro lesignated in this applicates of the complex with the provise	4770 Biscayne Blvd, Suite 1400 Miani (Cly) Mance: agistered agent and to accept service of mine. I hereby accent the appointment of	Florida 33137 (20p code) process for the above stated limited liability compa is registered agent and agree to act in this capacity and complete performance of my duties, and I an	. I fur. I famil
Office Address: Registered agent's accept faving been named as ro- lesignated in this application o comply with the provision accept the obligation	4770 Biscayne Blvd, Suite 1400 Miani (Cly) Miance: registered ugent and to accept Service of , thin, I hereby accept the appointment of lons of all statutes relative to the proper is of my position as registered agent. (Registered agent)	process for the above stated limited liability compa is registered agent and agree to act in this capacity and complete performance of my duties, and I an effecture)	. I jur.
Office Address: Registered agent's accept daving been named as ro lesignated in this applica a comply with the provis and accept the obligation 8. The name, title or cap	4770 Biscayne Blvd, Suite 1400 Miani (Cliv) stance: registered agent and to accept Service of , thion, I hereby accept the appointment to lons of all statutes relative to the properties of my position as registered agent. (Registered agents acity and address of the person(s) who h	process for the above stated limited liability compa is registered agent and agree to act in this capacity and complete performance of my duties, and I an electrony electrony	faniil
Office Address: Registered agent's accept faving been named as ro- lesignated in this application o comply with the provision accept the obligation 8. The name, title of cap <u>Title or Capacity:</u>	4770 Biscayne Blvd, Suite 1400 Miani (City) Mance: registered ugent and to accept service of thins of all statutes relative to the proper- ts of my position as registered agent. (Registered agent) acity and address of the person(s) who he Name and Address:	process for the above stated limited liability compa is registered agent and agree to act in this capacity and complete performance of my duties, and I an effecture)	faniil
Office Address: Registered agent's accept daving been named as ro lesignated in this applica a comply with the provis and accept the obligation 8. The name, title or cap	4770 Biscayne Blvd, Suite 1400 Miani (Cliv) stance: registered agent and to accept Service of , thion, I hereby accept the appointment to lons of all statutes relative to the properties of my position as registered agent. (Registered agents acity and address of the person(s) who h	process for the above stated limited liability compa is registered agent and agree to act in this capacity and complete performance of my duties, and I an electrony electrony	faniil

(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 onth 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 felling as provided for in s.817.155, F.S.

Ra Sike
Signative of m subortard person
Zala Eisac
Typed or printed name of signee

2.

No. 0852 P. 3/3

## <u>Delaware</u>

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SOUTH PALM MANOR 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 SEVENTH DAY OF DECEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SOUTH PALM MANOR . LLC" WAS FORMED ON THE FOURTH DAY OF DECEMBER, A.D. 2017.

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

¥ 050-7 AN .8: 49

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Authentication: 203704361 Date: **12-07-1**7

6645575 8300 SR# 20177433602 You may verify this certificate online at corp.delaware.gov/authver.shtml