

To: Page 2 of 12/7/2017

2017-12-11 13:15:08 CST

161-4554862 From: James Banks

Division of Corporations

# Florida Department of State

PLEASE HONOR THE ORIGINAL FILING DATE 12/7 Division of Corporations Electronic Filing Cover Sheet

PLEASE HONOR THE ORIGINAL FILING DATE 12/7

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

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (512)418-6949  
Fax Number : (954)208-0845

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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2017 DEC 11 PM 8:49

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ALL APPROVED

## Foreign Limited Liability Company Pare Station Acquisition LLC

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$160.00

Electronic Filing Menu Corporate Filing Menu Help  
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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Parc Station Acquisition 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:

Tara Nyack, Paralegal

\_\_\_\_\_  
Name of Person

Stroock & Stroock & Lavan LLP

\_\_\_\_\_  
Firm/Company

180 Maiden Lane, Rm. 3916

\_\_\_\_\_  
Address

New York, NY 10038

\_\_\_\_\_  
City/State and Zip Code

PFEM@stroock.com

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

For further information concerning this matter, please call:

Tara Nyack

212

806-6404

at ( )

\_\_\_\_\_  
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

# 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:

1. Parc Station Acquisition LLC  
(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  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 82-3557095  
(EIT number, if applicable)
4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration; see sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 270 Park Avenue, 7th Floor  
(Street Address of Principal Office)  
New York, NY 10017
6. P.O. Box 5005  
(Mailing Address)  
New York, NY 10163
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  
Name: C T Corporation System  
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: C T Corporation System

(Registered agent's signature)

**Joe Villada**  
**Assistant Secretary**

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

### Title or Capacity:

### Name and Address:

### Title or Capacity:

### Name and Address:

Sole Member

Commonwealth Pension Trust Fund (Strategic Property) of JPMorgan Chase Bank, N.A.  
270 Park Avenue, 7th Floor  
New York, NY 10017

(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)

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, P.S.

Signature of an authorized person

Donald Roderscheid, Executive Director of the Trustee of the Sole Member

Typed or printed name of signer

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "PARC STATION ACQUISITION 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 ELEVENTH DAY OF <sup>V</sup>DECEMBER, A.D. 2017.

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

27 NOV 07 11:18:49



6593678 8300

SR# 20177450948

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

Authentication: 203728414

Date: 12-11-17

850-617-6381

12/11/2017 11:42:21 AM PAGE 1/001 Fax Server



December 11, 2017

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: PARC STATION ACQUISITON LLC  
REF: W17000097691

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

The name on the certificate is misspelled, "ACQUISITON" instead of "ACQUISITION".,

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.

Karen A Saly  
Regulatory Specialist II

FAX Aud. #: H17000321733  
Letter Number: 317A00024949

2017 DEC 11 PM 2:22

TALLAHASSEE, FLORIDA

P.O. BOX 6327 - Tallahassee, Florida 32314