MITOCHOUS

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

Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195			
REFERENCE : 950205 76042	15		
AUTHORIZATION : Spelle Ble man			
COST LIMIT : \$\frac{1}{25.00}	ノ 		
ORDER DATE : December 11, 2017			
ORDER TIME : 11:44 AM			
ORDER NO. : 950205-010	ţ.		
CUSTOMER NO: 7604215		<u> </u>	
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FOREIGN FILINGS	[] 	~) >.	; []
		Ç.	\bigcirc
NAME: OL ORLANDO FL PARCEL ONE LANDLORD, LLC	;	<u>.,</u>	
HANDBOND, BBC			
XXXX QUALIFICATION (TYPE: <u>LL</u>)			
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:			
CERTIFIED COPY YX 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		
		d Liability Company for Authorization to Transact Busin the above referenced foreign limited liability company		
Please return a	all correspondence concerning to	his matter to the following:		
	Allison McLeod			
		Name of Person		_
	SunTrust Equity Funding,	LLC		
		Firm/Company		_
	3333 Peachtree Road, 10	th Floor		
		Address		_
	Atlanta, Georgia 30326		; ;	E.D.
		City/State and Zip Code		7,3
	karen.king@suntrust.com			~· ~·
	É-mail add	ress: (to be used for future annual report notification)	7-	<u> </u>
For further info	ormation concerning this matter	, please call:		
Kare	n King	at (404) 439-7662		; _1
	Name of Person	Area Code Daytime Telepho	ne Number	_
Divis Regis P.O. I	LING ADDRESS: tion of Corporations stration Section Box 6327 hassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
	a check for the following a 25.00 Filing Fee \$130.00		00 Filing Fee,	Cart East

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:

OL Orlando FL Parcel One Landlord, LLC			
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C	0.," or "L	LC.")	_
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and consent of the managers or managing members adopting the alternate name. The alternate name must incompany," "L.L.C," "LLC.")			
2. Delaware 3			
2. (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applic	able)		
4. N/A			
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)			
5. 3333 Peachtree Road, 10th Floor, MC 3951			
Atlanta, Georgia 30326			
(Street Address of Principal Office)	-	LE J La J La Maj	_
6. 3333 Peachtree Road, 10th Floor, MC 3951	<u> </u>	<u>-</u>	<u>.</u>
Atlanta, Georgia 30326		17	i ., -
(Mailing Address)	•	7,-	—, il
7. The name, title or capacity and address of the person(s) who has/have authority to a	nanage	is/are:	``.,
Allison McLeod, Manager, 3333 Peachtree Road, 10th Floor, MC 3951, Atlanta, Georgia 3032	26 -	; — ; -:	
			_
			_
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is		•	
translation of the certificate under oath of the translator must be submitted.)			
Signature of an authorized person			
(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmal penalties of perjury that the facts stated herein are true. I am aware that any false information document to the Department of State constitutes a third degree felony as provided for in	submitte	d in a	
Allison McLeod			

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name	of the Limited Liability Co	ompany is:			
OL Orlando F	L Parcel One Landlord, LLC				
If unavailable	e, the alternate to be used in	n the state of Florida is:			
2. The name	and the Florida street addr	ress of the registered agent and office at	re:		
	Corporation Service Com	npany			
		(Name)			
	1201 Hays Street				
	Florida Stree	et Address (P.O. Box NOT ACCEPTABLE)		E-SI mag mag mag	
	Tallahassee	32301	•	. ,	
		City/State/Zip		<u></u>	:
				·-	
liability comp registered ag statutes relati accept the ob	pany at the place designated ent and agree to act in this ing to the proper and compl	and to accept service of process for the d d in this certificate, I hereby accept the d capacity. I further agree to comply with lete performance of my duties, and I am registered agent as provided for in Chaj	uppointme h the provi familiar v	nt as> isions o _j vith and	f all
Statutes.	Corporation Service Comp		anne Turi Vice Pres		
	\$ 100 \$ 25	0.00 Filing Fee for Application 5.00 Designation of Registered Ager	nt		

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)



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

DELAWARE, DO HEREBY CERTIFY "OL ORLANDO FL PARCEL ONE LANDLORD,

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

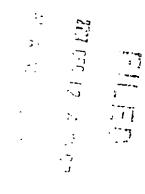
THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF DECEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OL ORLANDO FL

PARCEL ONE LANDLORD, LLC" WAS FORMED ON THE ELEVENTH DAY OF

DECEMBER, A.D. 2017.

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





Authentication: 203737240

Date: 12-12-17

6656696 8300 SR# 20177515114