## N180000009778

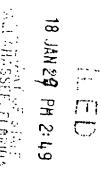
(Re	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
(Ві	usiness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 23, 2018

HARRY SHERMAN 18909 NE 29TH AVENUE AVENTURA, FL 33180

SUBJECT: MURANO 240, LLC Ref. Number: W18000006966

We have received your document for MURANO 240, LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

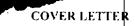
A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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

Letter Number: 118A00001472



TO:		ation Section n of Corporation	ns				
SUBJ		rano 240, LLC					
C. 17 2717			Name of	Limited Liabilit	y Company		
The er Existe	nclosed "A nce, and cl	pplication by For neck are submitte	eign Limited Liability Comp d to register the above refer	pany for Author enced foreign l	ization to Tra mited liability	nsact Business in Florida," C	Certificate of ss in Florida
Please	return all	correspondence c	concerning this matter to the	following:			
		Harry Sherman		,			
			N'	ame of Person			
		Cardone Real E	state Acquisitions				
			F	irm/Company			
		18909 NE 29th	Avenue				
				Address			
		Aventura, FL 3	33180				
			City/S	tate and Zip Co	de		
		harry@grantcard	one.com				
	-		E-mail address: (to be use	d for future ann	ual report not	ification)	
For fu	rther infor	mation concernin	g this matter, please call:				
	Harry S	Sherman		310 at (	777-025	55, ext. 163	
		Name o	f Contact Person	Area Co	de Day	time Telephone Number	
	Division Registra P.O. Bo	NG ADDRESS: n of Corporations ation Section ox 6327 ssee, FL 32314			Division o Registrati Clifton B 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	
Enclos		eck for the follow .00 Filing Fee	ing amount:  \$\Bigsize \text{S130.00 Filing Fee & Certificate of Status}\$	□ \$155.00 F Certified Co <sub>l</sub>		■ \$160.00 Filing Fee, Cer 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 IN SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1	Murano 240, LLC					
<b>M</b> .		Limited Liability Company; must include "Limited	d Liability Cl	ompany," "L L.C.," or "LLC.")		
	irano Grand Lakes, LLo	arme adopted for the purpose of transacting business in Flor	rida. The altern	ata nama must ingluda "I imitad I ial	adia Camana ""I I C" as "I I C")	
	Delaware	and adopted for the purpose of transacting dustiless in Fron		2-3940625	any company, table, or the s	
2. <u>*</u>		uch foreign limited liability company is organized)	3. <u>0.</u>		er, if applicable)	
	NUA					
4.	N/A	(Date first transacted business in Florida, if prior to	registration )			
		(Date first transacted business in Florida, if prior to to (See sections 605 0904 & 605,0905, F.S. to determine		1 *		
5.	(Street Address of F		6. <u>18</u>	909 NE 29th Avenue		
	Aventura, FL 33180	incipal ()Thee)	Av	(Mailing Addr Sentura, FL 33180	cssj	
•		<del></del>	_			
7.	Name and street address	s of Florida registered agent: (P.O. Box	NOT acc	eptable)		
	Name:	Grant Cardone		_		
	Office Address:	18909 NE 29th Avenure				
		Aventura		, Florida <u>33180</u>		
	gistered agent's accep	(City)	7	(Zip code	=)	
and	d accept the obligation:	ons of all statutes relative to the proper s of my position as registered agent.  (Registered agent's acity and address of the person(s) who had not a not Address:	as/have aut	,	duties, and I am familiar with	ľ
	Manager	Grant Cardone	/			
		18909 NE 29th Avenue				
		Aventura, FL 33180	- -			
			_			
(U	se attachments if neces	sary)		+		
jur		of existence, no more than 90 days old, of which it is organized. (If the certifical abmitted)				
		uted in accordance with section 605.0203				
sut	omitted in a document to	the Department of State constitutes a thi	ird øegree	felony as provided for in:	s.817.155, F.S.	
				/\/		
		Signature	of an authorize	d person		
		Grant T. Cardone	,	/		
		Typed or	printed name of	of signee		

Page 1

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MURANO 240, 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 EIGHTH DAY OF JANUARY, A.D. 2018.

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

6695515 8300 SR# 20180125000 You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 201935450

Date: 01-08-18