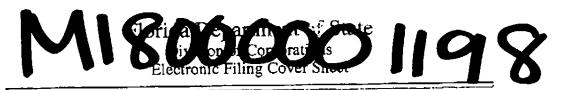
vivision of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H180000403263)))



H180000403263ABCY

To:				٠.	٠,
	Division of Co	rp	orations		
	Fax Number	:	(850)617-6383		
			••	1	
From:					
	Account Name	1	CORPORATE CREATIONS INTERNATION	DNA.	INC.
	Account Number	:	110432003053		(
	Phone	:	(561)694-8107		ζ
	Fax Number		(561)694-1639		
Inter the emai annual rep	.1 address for th ort mailings. Ent	is er	business entity to be used for only one email address please	futu .**	ı r ə
	e55:		<i>f</i> }		

Foreign Limited Liability Company Legacy 18 Associates, LLC

208.00	THE RESERVE OF THE PARTY OF THE
Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

RECEIVED

FEB 0 2 2018

J. HARRIS

Electronic Filing Menu

Corporate Filing Menu

Help

PAGE 02/03

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

Legacy 18 Associates, I	LC		
(Name of Foreign I	Imited Liability Company; must include "Limited		
wree unavailable, erter alternato pa	ime adopted for the purpose of transacting business in Flor	ids. The alternate name must include "Limited L	inbility Company," "LLLC," or "I.L.C.")
Delaware		3.	mber, (; emplicable)
(Juradiction under the law of wh	ich foreign limited liability company is organized)	(* 5.116)	make, 1) - j.j.
	(Vate first immalacted business in Florids, if grior to a (See sections 605,0904 & 605,0905, F.S. to determine	egistration.] ne penalty liability)	• · · · · · · · · · · · · · · · · · · ·
13727 SW 152 Street,		6 13727 SW 152 Street, 75	
(Street Address of P	rincipal Office)	(Alading A	ddress)
Miami , FL 33177		Miami , FL 33177	
			, ; ,
Name and street adders	g of Florida registered agent: (P.O. Box	NOT_acceptable)	Tu
(AEI) C SHC Bacci acato.			÷ · · · · · · · · · · · · · · · · · · ·
Name:	Corporate Creations Network Inc.		ς ;
Office Address:	11380 Prosperity Farms Road #221E		
Office Address:			
		334ID	
aving been named as re esignated in this applica ecomply with the provis	egistered agent and to accept service of , viion, I hereby accept the appointment a vions of all statutes relative to the propet	process for the above stated limit	ted liability company at the pla ted in this copacity. I further a try duties, and I am familiar wi
esignated in this applica comply with the provis	otance: egistered agent and to accept service of	process for the above stated limit	ted liability company at the pla test in this canacity. I further a
laving been named as re esignated in this applica ecomoly with the provis	otance: egistered agent and to accept service of accept the appointment accept the appointment of all statutes relative to the properties of my position appears agent.	process for the above stated limits registered agent and agree to a rand complete performance of n	ted liability company at the pla test in this canacity. I further a
Taving been named as re esignated in this applica comply with the provis nd accept the obligation	otance: egistered agent and to accept service of ation, I hereby accept the appointment of the statutes relative to the proper is of my position as registered agent. Savannah Montalban, At	process for the above stated limits registered agent and agree to a rand complete performance of n	ted liability company at the pla act in this capacity. I further as my duties, and I am familiar wit
Taving been named as re esignated in this applica comply with the provis nd accept the obligation	otance: egistered agent and to accept service of accept the appointment accept the appointment of all statutes relative to the properties of my position appears agent.	process for the above stated limits registered agent and agree to a rand complete performance of n	ted liability company at the plac tet in this capacity. I further as my duties, and I am familiar wit
Taving been named as re esignated in this applica o comply with the provis nd accept the obligation 8. The name, title or cap	otance: egistered agent and to accept service of ation, I hereby accept the appointment actions of all statutes relative to the properties of my position accepts service agent. Savannah Montalban, At bacity and address of the person(s) who have and Address: NMS BC Partners LLC	process for the above stated limits registered agent and agree to a rand complete performance of n	ted liability company at the planter in this capacity. I further as my duties, and I am familiar with the company duties and I am familiar with the company duties.
Taving been named as re esignated in this applica o comply with the provis nd accept the obligation 8. The name, title or cap Title or Capacity:	ctance: egistered agent and to accept service of ation, I hereby accept the appointment of the service of all statutes relative to the properties of my position progressered agent. Savannah Montalban, At sacity and address of the person(s) who have and Address: NMS BC Partners LLC 13727 SW 152 Street, 758	process for the above stated limits registered agent and agree to a rand complete performance of n complete performance of	ted liability company at the pla tet in this capacity. I further a my duties, and I am familiar with te:
saving been named as reesignated in this applicate comply with the provision accept the obligation. 3. The name, title or capacity:	otance: egistered agent and to accept service of ation, I hereby accept the appointment actions of all statutes relative to the properties of my position accepts service agent. Savannah Montalban, At bacity and address of the person(s) who have and Address: NMS BC Partners LLC	process for the above stated limits registered agent and agree to a rand complete performance of n	ted liability company at the pla tet in this capacity. I further a my duties, and I am familiar with te:
saving been named as reesignated in this applicate comply with the provision accept the obligation. 3. The name, title or capacity:	ctance: egistered agent and to accept service of ation, I hereby accept the appointment of the service of all statutes relative to the properties of my position progressered agent. Savannah Montalban, At sacity and address of the person(s) who have and Address: NMS BC Partners LLC 13727 SW 152 Street, 758	process for the above stated limits registered agent and agree to a rand complete performance of n complete performance of	ted liability company at the pla tet in this capacity. I further a my duties, and I am familiar wi
saving been named as reesignated in this applicate comply with the provision accept the obligation. 3. The name, title or capacity:	ctance: egistered agent and to accept service of ation, I hereby accept the appointment of the service of all statutes relative to the properties of my position progressered agent. Savannah Montalban, At sacity and address of the person(s) who have and Address: NMS BC Partners LLC 13727 SW 152 Street, 758	process for the above stated limits registered agent and agree to a rand complete performance of n complete performance of	ted liability company at the pla tet in this capacity. I further a my duties, and I am familiar wi
Taving been named as re esignated in this applica o comply with the provis nd accept the obligation 8. The name, title or cap Title or Capacity:	ctance: egistered agent and to accept service of ation, I hereby accept the appointment of the service of all statutes relative to the properties of my position progressered agent. Savannah Montalban, At sacity and address of the person(s) who have and Address: NMS BC Partners LLC 13727 SW 152 Street, 758	process for the above stated limits registered agent and agree to a rand complete performance of n complete performance of	ted liability company at the pla tet in this capacity. I further a my duties, and I am familiar wi
saving been named as resignated in this applicate occupily with the provision accept the obligation. 3. The name, title or cap Fitle or Capacity: Member	City) otance: egistered agent and to accept service of pation, I hereby accept the appointment actions of all statutes relative to the properties of my position accepts service agent. Savannah Montalban, At pacity and address of the person(s) who have and Address: NMS BC Partners LLC 13727 SW 152 Street, 758 Miami, FL 33177	process for the above stated limits registered agent and agree to a rand complete performance of n complete performance of	ted liability company at the pla tet in this capacity. I further a my duties, and I am familiar wi
saving been named as resignated in this applicate occupily with the provision accept the obligation. 3. The name, title or cap Title or Capacity: Member (Use attachments if necessity attachments if necessity).	City) otance: egistered agent and to accept service of suion, I hereby accept the appointment actions of all statutes relative to the properties of my position as registered agent. Savannah Montalban, At sacity and address of the person(s) who have and Address: NMS BC Partners LLC 13727 SW 152 Street, 758 Miami, FL 33177	process for the above stated limits registered agent and agree to a rand complete performance of n (COTTIC) -in-fact (CO	ted liability company at the plant in this capacity. I further any duties, and I am familiar with the plant is a second to the plant is a second t
Faving been named as reesignated in this applicate to this applicate to comply with the provision accept the obligation. 8. The name, title of capacity: Member (Use attachments if need of the capacity: Attached 18 a certification under the law	casery) cotance: egistered agent and to accept service of service of service of service of service of service of the appointment of service of all statutes relative to the properties of my position as registered agent. Savannah Montalban, At service and address of the person(s) who have and Address: NMS BC Partners LLC 13727 SW 152 Street, 758 Miami, FL 33177 cessary) te of existence, no more than 90 days old w of which it is organized. (If the certific	process for the above stated limits registered agent and agree to a rand complete performance of n (OTTE)-in-fact as/have authority to manage is/are Title or Capacity:	ted liability company at the planet in this capacity. I further any duties, and I am familiar with the planet in this capacity. I further any duties, and I am familiar with the planet in the planet
Taxing been named as reesignated in this applicate to this applicate to comply with the provision accept the obligation. 8. The name, title of capacity: Member (Use attachments if necessary acceptance of the translator must be set in the law of the translator must be	cotance: egistered agent and to accept service of the properties of my position professional montal ban. At service and address of the person(s) who have and Address: NMS BC Partners LLC 13727 SW 152 Street, 758 Miami, FL 33177 essary) te of existence, no more than 90 days old w of which it is organized. (If the certific submitted)	process for the above stated limits registered agent and agree to a rand complete performance of n torney-in-fact as/have authority to manage is/are Title or Capacity:	ted liability company at the planet in this capacity. I further a my duties, and I am familiar with the planet in this capacity. I further a my duties, and I am familiar with the planet in the plane
Taxing been named as reesignated in this applicate to this applicate to comply with the provision accept the obligation. 8. The name, title of capacity: Member (Use attachments if necessary acceptance of the translator must be set in the law of the translator must be	cotance: egistered agent and to accept service of the properties of my position professional montal ban. At service and address of the person(s) who have and address: NMS BC Partners LLC 13727 SW 152 Street, 758 Miami, FL 33177 essary) te of existence, no more than 90 days old w of which it is organized. (If the certific submitted)	process for the above stated limits registered agent and agree to a rand complete performance of n torney-in-fact as/have authority to manage is/are Title or Capacity:	ted liability company at the planet in this capacity. I further any duties, and I am familiar with the second section of the continuous at having custody of records in the selation of the continuate under continuation of the c

Typed or printed name of signee

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "LEGACY 18 ASSOCIATES, 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 SECOND DAY OF FEBRUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LEGACY 18

ASSOCIATES, LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF JANUARY,

A.D. 2018.

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

6735365 8300 SR# 20180690340

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202083680

Date: 02-02-18