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Special Instructions to	Filing Officer:					
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J. HARRIS

COVER LETTER

·TO:	Registration Section Division of Corporations					
SHRJI	Voyager Miami, LLC JECT:					
30 201	Name of Li	mited Liability C	Company			
	nclosed "Application by Foreign Limited Liability Compaence, and check are submitted to register the above referen					
Please	e return all correspondence concerning this matter to the fo	ollowing:				
	Heidi Smith c/o Daniel Crossland					
	Name of Person					
	Crossland Heinle & Bryde, LLC					
Firm/Company						
724 Yorklyn Road, Suite 100						
		Address				
Hockessin, DE 19707						
City/State and Zip Code						
ewaczynski@gmail.com						
E-mail address: (to be used for future annual report notification)						
For fu	urther information concerning this matter, please call:					
	Elizabeth Waczynski	302 at (690-5503			
	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			
Enclos	sed is a check for the following amount: ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy	ng Fee & \$160.00 Filing Fee, Certificate of Status & Certified Copy			



January 29, 2018

HEIDI SMITH C/O DANIEL CROSSLAND CROSSLAND HEINLE & BRYDE, LLC 724 YORKLYN ROAD, SUITE 100 HOCKESSIN, DE 19707

SUBJECT: VOYAGER MIAMI, LLC Ref. Number: W18000005198

We have received your document for VOYAGER MIAMI, 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:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

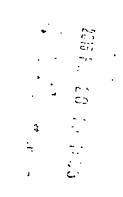
Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 018A00001881

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January 18, 2018

HEIDI SMITH C/O DANIEL CROSSLAND CROSSLAND HEINLE & BRYDE, LLC 724 YORKLYN ROAD, SUITE 100 HOCKESSIN, DE 19707

SUBJECT: VOYAGER MIAMI, LLC Ref. Number: W18000005198

We have received your document for VOYAGER MIAMI, 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.

Jenna D Harris Regulatory Specialist II

RECENED

JAM 2 6 2018

Letter Number: 318A00001161

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. Voyager Miami, LLC		THE COLUMN TEN TEN TO BE WITHOUT			
Voyager, LLC	Limited Liability Company; must include "Limit	led Liability Company," "L.L.C.," or "LLC."	,		
(If name unavailable, enter alternate n	anne adopted for the purpose of transacting business in F	lorida. The alternate name must include "Limited Lin	ability Company," "L.L.C," or "LLC.")		
2. State of Delaware	•	3. 6615556			
(Jurisdiction under the law of w	hich foreign limited liability company is organized)		ber, if applicable)		
4. January 1, 2018					
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0903, F.S. to deterr	o registration.) mine penalty liability)			
5. 10800 Collins Avenue		6. 4200 Newport Gap Pike			
(Street Address of	rincipal Office)	(Mailing Add	(Mailing Address)		
Miami Beach, FL 33154		Hockessin, DE 19707			
					
7. Name and street addres	ss of Florida registered agent: (P.O. Bo	x NOT acceptable)			
Name:	Registered Agents Inc.	. ,	, + CD		
	2020 N. Poslus Paint Paint See 150A		- ·		
Office Address:	3030 N. Rocky Point Drive, Ste 150A				
	Tampa	, Florida 33607			
Registered agent's accep	(City)	(Zip coc	(パ ム)		
, ` -	/s/Bjll Havre (Registered agent)	a signature)			
8. The name, title or cap	acity and address of the person(s) who h	nas/have authority to manage is/are:			
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:		
Managing Member	Elizabeth Waczynski				
	4200 Newport Gap Pike Hockessin, DE 19707	_ _			
					
		_			
(Use attachments if neces	sary)				
	of existence, no more than 90 days old of which it is organized. (If the certifical ubmitted)				
	cuted in accordance with section 605.020 to the Department of State constitutes a ti				
		beth Waczynski			
	Typed :	or printed name of signer			

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "VOYAGER MIAMI, 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 FOURTEENTH DAY OF FEBRUARY, A.D. 2018.



Authentication: 202147702

Date: 02-14-18