

Division of Corporations

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Florida Department of State
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To:

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

From:

Account Name : GREENSPOON MARDER, P.A.
Account Number : 076054003722
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Email Address: jmillier@alaptis.com

Foreign Limited Liability Company

WestEnd at 76Ten GP, LLC

Certificate of Status	1
Certified Copy	1
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**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. WestEnd at 76Ten GP LLC

(Name of Foreign Limited Liability Company. It 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. _____
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0504 and 605.0905, F.S., to determine penalty liability)

5. 4890 W. Kennedy Blvd., Suite 240

Tampa, FL 33609

(Street Address of Principal Office)

6. 4890 W. Kennedy Blvd., Suite 240

Tampa, FL 33609

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: James G. Miller

Office Address: 4890 W Kennedy Blvd., #240

Tampa

(City)

Florida 33609

(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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

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

Joseph G. Lubeck, Manager of American Landmark II LLC, the sole member of EMIF Management, LLC, the

sole member of WestEnd at 76Ten JV GP LLC, the general partner of WestEnd at 76Ten JV LP, the sole

member of WestEnd at 76Ten GP LLC; 4890 W. Kennedy Blvd., Suite 240, Tampa, FL 33609

9. Attached is a certificate of existence, not 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.)

(Signature of authorized person)

This document is executed in accordance with section 605.0703 (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, F.S.

Joseph G. Lubeck, Manager

(Typed or printed name of signer)

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WESTEND AT 76TEN GP 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 TWENTY-SECOND DAY OF FEBRUARY, A.D. 2018.

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



6764865 8300

SR# 20181227638

You may verify this certificate online at corp.delaware.gov/authver.shtmlHandwritten signature of Jeffrey W. Bullock, Secretary of State, over a horizontal line.
Jeffrey W. Bullock, Secretary of State

Authentication: 202194625

Date: 02-22-18

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