M18000002869

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(B	dusiness Entity Name	e)
(C	Oocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	o Filing Officer:	

Office Use Only



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18 MAR 23 AM 9: 49 EPAR 23 PH 4: 19

Y SULKER MAR 2 6 2018 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO IZUUUUUIJ	ACCOUNT	NO.	:	I20000000199
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REFERENCE: 125161 5174517

AUTHORIZATION : Spell Blend

COST LIMIT : '\$ 1-25.00

ORDER DATE: March 20, 2018

ORDER TIME : 3:24 PM

ORDER NO. : 125161-005

CUSTOMER NO: 5174517

FOREIGN FILINGS

NAME: GATOR APARTMENT INVESTORS LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT#

EXAMINER:

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	Gator Apartment Investors LLC				
SUBJE	ECT: Name of Lin	nited Liability C	ompany		
The en Exister	nclosed "Application by Foreign Limited Liability Compan nce, and check are submitted to register the above reference	y for Authorizat ed foreign limite	ion to Tran ed liability	sact Business in Florida," Certific company to transact business in F	ate of lorida.
Please	return all correspondence concerning this matter to the following	llowing:			
	David Salmanson				
	Nam	e of Person	<u>.</u>		
	Salmanson Capital, LLC				
	Firm	/Company			
	360 Madison Avenue, Suite 1902				
	,	Address			
	New York, NY 10017				
	City/Stat	e and Zip Code			
	david@salmansoncapital.com				
	E-mail address: (to be used f	or future annual	report noti	fication)	
For fu	orther information concerning this matter, please call:				
	David Salmanson	212 at (213-127	0	
	Name of Contact Person	Area Code	Dayt	ime Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division o Registratio Clifton Bu 2661 Exec		
Enclos	osed is a check for the following amount: \$\Boxed{\text{\text{\$\subset\$} \$\\$125.00 \text{Filing Fee} & \text{\text{\$\subset\$} \$\\ \text{Certificate of Status}}\$	□ \$155.00 Filin Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Certificat of Status & Certified Copy	e

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

IN COMPLIANCE WITH SECTION (05.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	Limited Liability Company; must include "Esni		
f name unavailable, enter alternate n	ame adopted for the purpose of transacting business in F		ility Company," "tt.L.C," or "ILLC,")
Delaware		3. 82-4854438	
(Jurisdiction under the law of w	such foreign landed liability company is organized)	(३३:) तस्यानान्त्र	er, if applicable)
Date of Filing.			
·	(Date first transacted business in Florida, if prior free sections (4)5 (9)04 & 605 (99)5, P.5. to deter	to registration) more penalty liability)	
360 Madison Avenue.			1902
(Street Address of		6. 360 Madison Avenue, Suite	ess)
New York, NY 10017		New York, NY 10017	
. Name and street address	of Florida registered agent: (P.O. Bo	ox <u>NOT</u> acceptable)	
Name:	Corporation Service Company		
Office Address:	1201 Hays Street		
	Tallahassee	Florida 32301 (Zip code	
	(Ciry)	(Zip code	*)
	ions of all statutes relative to the prop is of proposition as registered agent. Corporation Serving Company By	er and complete performance of my o	Hoxanne
and accept the obligation	ions of all statutes relative to the prop is of pay position as registered agent.	er and complete performance of my of the signature.	duties, and I am familias, with
8. The name, title or cap	ions of all statutes relative to the prop is of pay position as registered agent. Corporation Service Company By: (Registered agen acity and address of the person(s) who Name and Address:	has/have authority to manage is/are:	Roxanne Turner Asst. Vice Rresiden
and accept the obligation 8. The name, title or cap	ions of all statutes relative to the prop is of proposition as registered agent. Corporation Service Company By: (Registered agent acity and address of the person(s) who	has/have authority to manage is/are: Title or Capacity:	Asst. Vice Rresiden
8. The name, title or cap	ions of all statutes relative to the prop is of proposition as registered agent. Corporation Sevine Company By: (Registered agent acity and address of the person(s) who Name and Address: Gator Apartment Venture I 360 Madison Avenue, Suite	has/have authority to manage is/are: Title or Capacity:	Asst. Vice Residen
8. The name, title or cap Title or Capacity: Sole Member	ions of all statutes relative to the prop is of proposition as registered agent. Corporation Sevice Company By: (Registered agent acity and address of the person(s) who Name and Address: Gator Apartment Venture I 360 Madison Avenue, Suite New York, NY 10017.	has/have authority to manage is/are: Title or Capacity:	Asst. Vice Rresiden
8. The name, title or cap Title or Capacity: Sole Member	ions of all statutes relative to the prop is of proposition as registered agent. Corporation Sevice Company By: (Registered agent acity and address of the person(s) who Name and Address: Gator Apartment Venture I 360 Madison Avenue, Suite New York, NY 10017.	has/have authority to manage is/are: Title or Capacity:	Asst. Vice Rresiden
8. The name, title or cap Title or Capacity: Sole Member (Use attachments it necessors) Attached is a certificate purisdiction under the law of the translator must be so	lons of all statutes relative to the prop is of or position as registered agent. Corporation Service Company By: (Registered agent acity and address of the person(s) who Name and Address: Gator Apartment Venture I 360 Madison Ayenue, Suite New York, NY 10017. Ssary) of existence, no more than 90 days of which it is organized. (If the certific submitted)	has/have authority to manage is/are: Title or Capacity: LLC 1902 d, duly authoriticated by the official have at a foreign language, a translat	Name and Address Name and Address Name and Address Assignment to the certificate under oath
8. The name, title or cap Title or Capacity: Sole Member (Use attachments if necessity and the translator must be second to the translator must be second.)	ions of all statutes relative to the prop is of on position as registered agent. Corporation Service Company By: (Registered agent acity and address of the person(s) who Name and Address: Gator Apartment Venture I 360 Madison Avenue, Suite New York, NY 10017. ssary) c of existence, no more than 90 days of of which it is organized. (If the certific submitted) cuted in accordance with section 605.07 of the repartment of State constitutes a	thas/have authority to manage is/are: Title or Capacity: (d. duly authoriticated by the official have is in a foreign language, a translate cate is in a foreign language.	Name and Address: Name and Addr
8. The name, title or cap Title or Capacity: Sole Member (Use attachments if necessity and the translator must be second to the translator must be second.)	ions of all statutes relative to the prop is of on position as registered agent. Corporation Service Company By: (Registered agent acity and address of the person(s) who Name and Address: Gator Apartment Venture I 360 Madison Avenue, Suite New York, NY 10017. ssary) c of existence, no more than 90 days of of which it is organized. (If the certific submitted) cuted in accordance with section 605.07 of the repartment of State constitutes a	has/have authority to manage is/are: Title or Capacity: LLC 1902 d. duly authoriticated by the official have ate is in a foreign language, a translate third degree felory as provided for in	Name and Address: Name and Addr

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "GATOR APARTMENT INVESTORS 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 TWENTIETH DAY OF MARCH, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GATOR APARTMENT INVESTORS LLC" WAS FORMED ON THE FOURTEENTH DAY OF MARCH, A.D. 2018.

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

18 MAR 23 AM 9: 49

Authentication: 202357589

Date: 03-20-18

6797251 8300 SR# 20182057254