## Division of Corporations Electronic Filing Cover Sheet

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Account Number : I20060000135 : (305)789-3200 Phone : (305) 789-4137 Fax Number

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## Foreign Limited Liability Company 2262 WILTON DRIVE OWNER LLC

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Electronic Filing Menu

Corporate Filing Menu

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JUN 1 1 2018

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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:

2262 WILTON DRIVE	OWNER LLC gn Limited Liability Company; mus	t include "Limited Liab	ility Company," "L.L.C.," or "	LLC.")	٠	-
						_
isbility Company," "L.L.C,"	ernate name adapted for the purpose or "LLC.")		in Florida. The alternate name	e must inc	lude "Lir	nited
DELAWARE		3. 83-0566362	(FEI number, if applicable)			_
company is organized)	of which foreign limited liability		(FEI Rumber, it applicable)			
Date of filing with the I	FL Dept. of State			-		
	(Date first transacted busine (See sections 605.0904 & 605.	ss in Florida, if prior to 0905, F.S. to determine	registration.) : penalty liability)			
2977 McFarlane Road,	Suite 300		·	_		
2777 17101 27122	<del></del>			<u> </u>	2018	
Miami, FL 33133	(Street Address of	Principal Office)		- ;- ;- - ;- ;-		• .
2977 McFarlane Road,	`	, , , , , , , , , , , , , , , , , , , ,		<u> </u>	MUL	:
2977 McTariane Road,	2010 500			- (i, )	-8	
Miami, FL 33133				 		(CC)
	(Mailing	Address)		70	PX	, · · ·
. Name and street addres	s of Florida registered agent: (P	O. Box NOT accept	able)	95	<del></del>	(
Name:	Stearns Weaver Miller et. al.,			5	50	
Office Address:	150 West Flagler St., Suite 220	00	_			
	Miami		_ , Florida <u>33130</u> (Zip code)	_		
	(City)		(Zip code)			
lesignated in this applica o complywith the provisi	rance:  gistered agent and to accept sertion, I hereby accept the appoint ons of all statutes relative to the my position as registered agent.  (Regin (Registered)	proper and complet	e performance of my duties			
	•					
8. The name, title or cap	acity and address of the person(s	i) who has/have autho	rity to manage is/are:			
Grass River Property LL	C, Member, 2977 McFarlane Ro	ad, Suite 300, Mismi	, FL 33133		_	
	<u> </u>					
					_	
<ol> <li>Attached is a certificate jurisdiction under the law of the translator must be s</li> </ol>	e of existence, no more than 90 of which it is organized. (If the submitted)	tays old, duly authent certificate is in a fore  Hee  re of an authorized pers	ign language, a trausiation i	g custody of the cer	of recor tificate	ds in the under oat
	Signatu	re of an authorized pers	on			
This document is execute	d in accordance with section 605 to the Department of State consti	10203 (1) (b) Florida	Statutes, I am aware that a	ny false i 7.155, F	nformati .S.	<b>o</b> n
paying ited in a document	Curtis H. Sitterson, Authorize					

Typed or printed name of signee

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "2262 WILTON DRIVE OWNER 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 FIFTEENTH DAY OF MAY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "2262 WILTON DRIVE OWNER LLC" WAS FORMED ON THE FIFTEENTH DAY OF MAY, A.D. 2018.

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

Authentication: 202696452

Date: 05-15-18

6886272 8300

SR# 20183774695