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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : HARVARD BUSINESS SERVICES, INC.
Account Number : 120080000045
Phone : (302) 645-7400
Fax Number : (302) 645-1290

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: daphnie@crosbycapitalusa.com

Foreign Limited Liability Company
Cape Miami 32 LLC

Certificate of Status	1
Certified Copy	0
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7/12/2018

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2018 JUL 13 AM 7:30

DEPARTMENT OF
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

REC'D

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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. Cape Miami 32 LLC
 (Name of Foreign Limited Liability Company; 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. _____
 (F.I. number, if applicable)

4. _____
 (Date first transacted business in Florida, if prior to registration)
 (See sections 605.0901 & 605.0902, F.S. to determine penalty liability)

5. 1688 Meridian Ave 6th Floor
 (Street Address of Principal Office)
Miami Beach, FL 33139

6. 1688 Meridian Ave 6th Floor
 (Mailing Address)
Miami Beach, FL 33139

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

Name: Registered Agents Inc.

Office Address: 3030 N. Rocky Point Dr., STE 150A

Tampa, Florida 33607
 (City) (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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Bill Hume
 (Registered agent's signature)

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

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
MGR	Yonel Devisio 1688 Meridian Ave 6th Floor Miami Beach, FL 33139		

(Use attachments if necessary)

9. Attached is a certificate of existence, no 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)

10. This document is executed in accordance with section 605.0203 (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.

Yonel Devisio
 Signature of an authorized person

Yonel Devisio

Typed or printed name of signer

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 DEPARTMENT OF STATE
 1000 PENNSYLVANIA AVE
 WASHINGTON, DC 20540

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Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CAPE MIAMI 32 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 TWELFTH DAY OF JULY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CAPE MIAMI 32 LLC" WAS FORMED ON THE THIRTEENTH DAY OF SEPTEMBER, A.D. 2017.

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

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DELAWARE STATE
DEPARTMENT OF REVENUE



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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203055035

Date: 07-12-18

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