

M18000009085

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

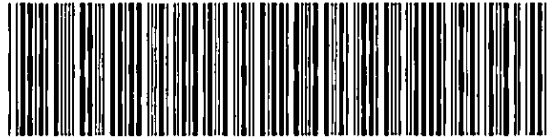
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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10 OCT -4 AM 10

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18 OCT -4 AM 6:15  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

K SAIY  
OCT -5 2018

**CORPORATE  
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**WALK IN**

**PICK UP:** 10/03/18

**xx**      **CERTIFIED COPY** \_\_\_\_\_  
☐      **PHOTOCOPY** \_\_\_\_\_  
☐      **CUS** \_\_\_\_\_  
**xx**      **FILING**                      **FOREIGN** \_\_\_\_\_

1.      **GFN MARAMAR, LLC**  
          (CORPORATE NAME AND DOCUMENT #)
2.      \_\_\_\_\_  
          (CORPORATE NAME AND DOCUMENT #)
3.      \_\_\_\_\_  
          (CORPORATE NAME AND DOCUMENT #)
4.      \_\_\_\_\_  
          (CORPORATE NAME AND DOCUMENT #)
5.      \_\_\_\_\_  
          (CORPORATE NAME AND DOCUMENT #)
6.      \_\_\_\_\_  
          (CORPORATE NAME AND DOCUMENT #)

**SPECIAL  
INSTRUCTIONS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** GEN Miramar, LLC  
\_\_\_\_\_  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Jessica French  
\_\_\_\_\_  
Name of Person

Kayne Anderson Real Estate Advisors, LLC  
\_\_\_\_\_  
Firm/Company

One Town Center Road, STE 300  
\_\_\_\_\_  
Address

Boca Raton, FL 33486  
\_\_\_\_\_  
City/State and Zip Code

jfrench@kaynecapital.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jessica French                      561                      300-6255  
\_\_\_\_\_  
Name of Contact Person                      at (                      )                      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

Enclosed is a check for the following amount:

- |  |   |  |   |
|--|---|--|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$160.00 Filing Fee, Certificate<br>of Status & Certified Copy |
|--|---|--|---|

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. GEN Miramar, 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.

(FBI number, if applicable)

4. UPON FILING

(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. c/o Kayne Anderson Real Estate Advisors, LLC

One Town Center Road, STE 300, Boca Raton, FL 33486

(Street Address of Principal Office)

6. c/o Kayne Anderson Real Estate Advisors, LLC

One Town Center Road, STE 300, Boca Raton, FL 33486

(Mailing Address)

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

Name: NRAI Services, Inc.

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324

(City)

(Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.

By:

NRAI Services, Inc.

(Registered agent's signature)

Donna Caswell, Asst. Secy.

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

Meegan T. Motisi, Authorized Person

1 Town Center Rd, STE 300

Boca Raton, FL 33486

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)

Meegan Motisi

Signature of an authorized person

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.

Meegan T. Motisi

Typed or printed name of signer

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18 OCT -14 AM 6:13  
STATE  
TALLAHASSEE, FLORIDA

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GFN MIRAMAR, 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 THIRD DAY OF OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GFN MIRAMAR, LLC" WAS FORMED ON THE THIRD DAY OF OCTOBER, A.D. 2018.

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

FILED  
18 OCT -4 AM 6:12  
SECRETARY OF STATE  
HALLMARKS, FLORIDA



7085180 8300

SR# 20186960743

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State

Authentication: 203540633

Date: 10-03-18