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Florida Department of State
Division of Corporations
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To: Division of Corporations
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From: Account Name : CAPITOL SERVICES, INC.
Account Number : 12016000017
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Foreign Limited Liability Company
T AMELIA MKT B FL, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
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From:

Name: Kim Tadlock

Email: ktadlock@capitol-services.com

Fax No: 800-432-3622

Voice No: 855-498-5500

Subject:

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. T Amelia Mkt B FL, 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. Texas 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable)

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

5. 16600 Dallas Parkway Suite 300
(Formal Address of Principal Office)
Dallas, Texas 75248

6. 16600 Dallas Parkway Suite 300
(Mailing Address)
Dallas, Texas 75248

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

Name: Capitol Corporate Services, Inc.
Office Address: 515 East Park Avenue 2nd Fl
Tallahassee, Florida 32301
(City) (Zip code)

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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.

Teresa Sharpley Teresa Sharpley, Assistant Secretary on
(Registered agent's signature) behalf of Capitol Corporate Services, Inc.

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:
Manager	Zaffar S. Tabani 16600 Dallas Parkway Suite 300 Dallas, Texas 75248		

(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.

Zaffar S. Tabani
Signature of an authorized person

Zaffar S. Tabani, Manager
Typed or printed name of signer

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Rolando B. Pablos
Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for T Amelia Mkt B FL, LLC (file number 803131939), a Domestic Limited Liability Company (LLC), was filed in this office on October 02, 2018.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on October 03, 2018.



A handwritten signature in black ink, appearing to read "R. Pablos".

Rolando B. Pablos
Secretary of State

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