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#### FLORIDA FILING & SEARCH SERVICES, INC.

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PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

11/20/18

NAME:

2201 N. MIAMI AVE OWNER, LLC

TYPE OF FILING: APPLICATION

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125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE /

## 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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

2201 N. Miami Ave O	wner, LLC		
(Name of Foreign	Limited Liability Company; must include "Lim	ited Liability Company," "L.L.C.," or "LLC.	")
If name imavailable, enter alternate a	name adopted for the purpose of transacting business in I	Florids. The alternate name want include "I imited I	inhibitor Common " "I I C " or "I I C ")
Delaware		97 2222614	ability company. E.E.C. W EEC. )
	nich foreign limited liability company is organized)	J	nber, if applicable)
	(Date first transacted business in Florids, if prior (See sections 605.0904 & 605.0905, F.S. to deter	to registration.) mine penalty hability)	<del></del>
4700 Wilshire Blvd.		6. 4700 Wilshire Blvd.	
(Street Address of Los Angeles, CA 9001	•	(Mailing Ad	dress)
LOS Aligeres, CA 9001		Los Angeles, CA 90010	<del></del>
<del></del>		<del> </del>	<u> </u>
. Name and street addres	ss of Florida registered agent: (P.O. Bo	x NOT acceptable)	HOV 20
	Paracorp Incorporated		2
Name:	<del></del>	<del>_</del>	
Office Address:	155 Office Plaza Drive, 1st Floor	- <del></del>	以 是
	Tallahassee	, Florida 32301	H N
legistered agent's accept	(City)	(Zip coc	(A)
comply with the provisi	ons of all statutes relative to the prope of of my position as registered agent.	as registered agent and agree to act r and complete performance of my	in this capacity. I further agr duties, and I am familiar with
comply with the provisi	ons of all statutes relative to the prope of my position as registered agent.  SEE ATTA(#	r and complete performance of my	in this capacity. I further agreduties, and I am familiar with
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comply with the provision accept the obligations  The name, title or capa Title or Capacity:	ons of all statutes relative to the property of my position as registered agent.  SEE ATTA(H)  (Registered agent's city and address of the person(s) who have and Address:	as/have authority to manage is/are:	duties, and I am familiar with
comply with the provision accept the obligations  The name, title or capa	ons of all statutes relative to the property of my position as registered agent.  SEE ATTA(H)  (Registered agent's city and address of the person(s) who have and Address:  2201 N. Minmi Ave Holdings, LLC  4700 Wilshire Blvd.	as/have authority to manage is/are:	duties, and I am familiar with
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. The name, title or capa Title or Capacity: Manager  Jse attachments if necess:	cons of all statutes relative to the proper of my position as registered agent.  SEE ATTA(H)  (Registered agent's city and address of the person(s) who he Name and Address:  2201 N. Miami Ave Holdings, LLC  4700 Wilshire Blvd. Los Angeles, CA 90010	as/have authority to manage is/are:  Title or Capacity:	Name and Address:
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#### STATE OF FLORIDA

#### REGISTERED AGENT CONSENT FORM

DATE:

11/19/2018

ENTITY NAME:

2201 N. Miami Ave Owner, LLC

#### REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Leticia Herrera, Assistant Secretary

Paracorp Incorporated

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# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "2201 N. MIAMI AVE 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 NINETEENTH DAY OF NOVEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "2201 N. MIAMI

AVE OWNER, LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF OCTOBER, A.D.

2018.

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

18 HOV 20 AH 12: 30

Authentication: 203932239

Date: 11-19-18

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