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2018 DEC -6 AM 9: Lily DEC -e TH 1: SECRETARY OF STATE

DEC 7: S. PRATHER

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 515860 4322606

AUTHORIZATION : Spelleden

COST LIMIT : \$\(\frac{1}{2}5\)\(\frac{1}{2}00\)

ORDER DATE: December 5, 2018

ORDER TIME : 1:32 PM

ORDER NO. : 515860-005

CUSTOMER NO: 4322606

FOREIGN FILINGS

NAME: GPAI UPTOWN 22, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER:

COVER LETTER

TO:	Registration Secti Division of Corpo					
SUBJE	GPAI Uptown	22, LLC				
		Name of	Limited Liability Company			
The en- Existen	closed "Application b ce, and check are sub	by Foreign Limited Liability Com committed to register the above refer	pany for Authorization to Trenced foreign limited liabili	ransact Business in Florida," Certificate of ty company to transact business in Florida,		
Please	return all corresponde	ence concerning this matter to the	following:			
	Luke C. S	impson				
		ν	lame of Person			
	Grand Per	aks Properties				
	Firm/Company					
	4582 South Ulster Street Parkway, Suite 1200					
	Address					
	Denver, C	Colorado 80237				
	-	City/S	State and Zip Code			
	lsimpson@	grandpeaks.com				
		E-mail address: (to be use	d for future annual report no	tification)		
For furt	her information conc	erning this matter, please call:		•		
	Luke C. Simpson		720 \$89-93 at ()			
	Nε	ame of Contact Person	Area Code Day	ytime Telephone Number		
	MAILING ADDRI Division of Corpora Registration Section P.O. Box 6327 Tallahassee, FL 323	itions	Division Registrat Clifton E 2661 Exc	of Corporations tion Section Building ecutive Center Circle see, FL 32301		
Enclose	d is a check for the fo ☐ \$125.00 Filing Fo		☐ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Certificate 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:

(If name unavailable, enter alternate	name adopted for the purpose of transacting business in F	lorida. The alternate name must include "Limite	d Liability Company," "L.L.C." or "LLC")
2. Delaware	· · · · · · · · · · · · ·	3. ^{n/a}	, , , , , , , , , , , , , , , , , , , ,
	shich foreign limited liability company is organized)		number, if applicable)
4. December 3, 2018			
	(Date first transacted business in Florida, if prior t (See sections 605,0904 & 605,0905, F.S. to deteri	o registration.) nine penalty liability)	
5. 4582 South Ulster Str		6. 4582 South Ulster Stre	et Parkway, Suite 1200
(Street Address of	Principal Office)	(Mailing	; Address)
Denver, Colorado 803	237	Denver, Colorado 802:	37 (2
			<u> </u>
7 81	ari i i i i i i i i i i i i i i i i i i	Non	NO BOEC -
7. Name and street addre	ss of Florida registered agent: (P.O. Bo	x <u>NO1</u> acceptable)	\$ 6 .
Name:	Corporation Service Company		-6 A COFE
Office Address:	1201 Hays Street		, 0, 4,
	Tallahassee	, Florida 32301	門当一
	(City)	, Florida	p code)
and accept the obligation	s of my position as registered agent	r and complete performance of i	my duties, and I am familiar with
and accept the obligation	ions of all statutes relative to the propers of my position as registered agent. Corporation Service Company By: (Vigistered agent)	r and complete performance of the Emily	Croft
and accept the obligation 8. The name, title or cap	Cornoration as registered agent. Cornoration Service Company By: (Vegistered agent's acity and address of the person(s) who had	Emily ASSI. Vice as/have authority to manage is/ar	my duties, and I am familiar with Croft President c:
8. The name, title or cap Title or Capacity:	Cornoration as registered agent. Cornoration Service Company By: Typistered agent's acity and address of the person(s) who have and Address:	Emily ASSI. Vice as/have authority to manage is/ar Title or Capacity:	ny duties, and I am familiar with Croft President c: Name and Address:
and accept the obligation 8. The name, title or cap	cornoration as registered agent. Cornoration Service Company By: (Vegistered agent's acity and address of the person(s) who had a h	Emily ASSI. Vice as/have authority to manage is/ar	President c: Name and Address: 4582 S. Ulster Street Pkwy
8. The name, title or cap Title or Capacity:	Cornoration as registered agent. Cornoration Service Company By: Typistered agent's acity and address of the person(s) who have and Address:	Emily ASSI. Vice as/have authority to manage is/ar Title or Capacity:	ny duties, and I am familiar with Croft President c: Name and Address:
8. The name, title or cap Title or Capacity:	acity and address of the person(s) who hame and Address: 4582 S. Ulster Street Pkwy Suite 1200	Emily ASSI. Vice as/have authority to manage is/ar Title or Capacity:	President c: Name and Address: 4582 S. Ulster Street Pkwy Suite 1200
8. The name, title or cap	acity and address of the person(s) who hame and Address: 4582 S. Ulster Street Pkwy Suite 1200	Emily ASSI. Vice as/have authority to manage is/ar Title or Capacity:	President c: Name and Address: 4582 S. Ulster Street Pkwy Suite 1200
8. The name, title or cap Title or Capacity:	acity and address of the person(s) who hame and Address: 4582 S. Ulster Street Pkwy Suite 1200	Emily ASSI. Vice as/have authority to manage is/ar Title or Capacity:	President c: Name and Address: 4582 S. Ulster Street Pkwy Suite 1200
8. The name, title or cap Title or Capacity: GPAI 2018, LLC	acity and address of the person(s) who have and Address: 4582 S. Ulster Street Pkwy Suite 1200 Denver, Colorado 80237	Emily ASSI. Vice as/have authority to manage is/ar Title or Capacity:	President c: Name and Address: 4582 S. Ulster Street Pkwy Suite 1200
8. The name, title or cap Title or Capacity: GPAI 2018, LLC	acity and address of the person(s) who hame and Address: 4582 S. Ulster Street Pkwy Suite 1200 Denver, Colorado 80237	as/have authority to manage is/ar Title or Capacity: Managing Member	President c: Name and Address: 4582 S. Ulster Street Pkwy Suite 1200 Denver, Colorado 80237
8. The name, title or cap Title or Capacity: GPAI 2018, LLC (Use attachments if neces)	acity and address of the person(s) who hame and Address: 4582 S. Ulster Street Pkwy Suite 1200 Denver, Colorado 80237	as/have authority to manage is/ar Title or Capacity: Managing Member duly authenticated by the officia	President c: Name and Address: 4582 S. Ulster Street Pkwy Suite 1200 Denver, Colorado 80237
8. The name, title or cap Title or Capacity: GPAI 2018, LLC (Use attachments if neces)	acity and address of the person(s) who hame and Address: 4582 S. Ulster Street Pkwy Suite 1200 Denver, Colorado 80237	as/have authority to manage is/ar Title or Capacity: Managing Member duly authenticated by the officia	President c: Name and Address: 4582 S. Ulster Street Pkwy Suite 1200 Denver, Colorado 80237
8. The name, title or cap Title or Capacity: GPAI 2018, LLC (Use attachments if neces) Attached is a certificate urisdiction under the law of the translator must be sign. This document is executed.	acity and address of the person(s) who hame and Address: 4582 S. Ulster Street Pkwy Suite 1200 Denver, Colorado 80237 sary) sof existence, no more than 90 days old, of which it is organized. (If the certifical ubmitted) uted in accordance with section 605,020	as/have authority to manage is/ar Title or Capacity: Managing Member duly authenticated by the official te is in a foreign language, a trans	President c: Name and Address: 4582 S. Ulster Street Pkwy Suite 1200 Denver, Colorado 80237 I having custody of records in the slation of the certificate under oath
8. The name, title or cap Title or Capacity: GPAI 2018, LLC (Use attachments if neces) Attached is a certificate urisdiction under the law of the translator must be so. This document is executed.	Sof my position as registered agent. Cornoration Service Company By: Typistered agent's actity and address of the person(s) who have and Address: 4582 S. Ulster Street Pkwy Suite 1200 Denver, Colorado 80237 sary) of existence, no more than 90 days old, of which it is organized. (If the certifical abmitted) uted in accordance with section 605.020 of the Department of State constitutes a the	ASSI. Vice as/have authority to manage is/ar Title or Capacity: Managing Member duly authenticated by the officia te is in a foreign language, a trans (1) (b), Florida Statutes. I am addited degree felony as provided for	President c: Name and Address: 4582 S. Ulster Street Pkwy Suite 1200 Denver, Colorado 80237 I having custody of records in the slation of the certificate under oath
8. The name, title or cap Title or Capacity: GPAI 2018, LLC (Use attachments if neces) Attached is a certificate urisdiction under the law of the translator must be sign. This document is executed.	Sof my position as registered agent. Cornoration Service Company By: Typistered agent's actity and address of the person(s) who have and Address: 4582 S. Ulster Street Pkwy Suite 1200 Denver, Colorado 80237 sary) of existence, no more than 90 days old, of which it is organized. (If the certifical abmitted) uted in accordance with section 605.020 of the Department of State constitutes a the	as/have authority to manage is/ar Title or Capacity: Managing Member duly authenticated by the official te is in a foreign language, a trans	President c: Name and Address: 4582 S. Ulster Street Pkwy Suite 1200 Denver, Colorado 80237 I having custody of records in the slation of the certificate under oath
8. The name, title or cap Title or Capacity: GPAI 2018, LLC (Use attachments if neces) Attached is a certificate urisdiction under the law of the translator must be sign. This document is executed.	Sary) To f existence, no more than 90 days old, of which it is organized. (If the certifical abmitted) The particular of the person of the p	ASSI. Vice as/have authority to manage is/ar Title or Capacity: Managing Member duly authenticated by the officia te is in a foreign language, a trans 3 (1) (b), Florida Statutes. I am artified degree felony as provided for	President c: Name and Address: 4582 S. Ulster Street Pkwy Suite 1200 Denver, Colorado 80237 I having custody of records in the slation of the certificate under oath

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "GPAI UPTOWN 22, 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 DECEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GPAI UPTOWN 22, LLC" WAS FORMED ON THE THIRD DAY OF DECEMBER, A.D. 2018.

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

Authentication: 204010360

Date: 12-03-18

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