M19000001033

(Requestor's Name)	
(Address)	-
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	M AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	<u></u>
Special Instructions to Filing Officer:	
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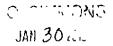
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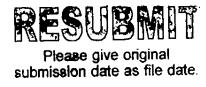
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19 JAN 25 AH 9: 15 SECRETARY OF STATE ALLAHASSEE, FLORIDA

19 JAN 25 PH 1:52







FLORIDA DEPARTMENT OF STATE Division of Corporations

January 28, 2019

CSC

SUBJECT: BREIT ORANGE MANOR MHC LLC

Ref. Number: W19000008582

We have received your document for BREIT ORANGE MANOR MHC LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist III

Letter Number: 519A00001909

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 588696 8182938

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : January 16, 2019

ORDER TIME : 5:40 PM

ORDER NO. : 588636-015

CUSTOMER NO: 8182938

FOREIGN FILINGS

NAME: BREIT ORANGE MANOR MHC 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: Roxanne Turner -- EXT# 62969

EXAMINER: ____

COVER LETTER

TO:	Registration Se Division of Cor						
SUBJE		nge Manor MHC LLC					
			Name of Limited	Liability C	ompany		
						nsact Business in Florida," Cer company to transact business	
Please	eturn all correspo	ndence concerning this ma	atter to the followi	ing:			
	Leslie	M. Robelly					
			Name of	Person			
	Revant	age Corporate Services					
			Firm/Cor	прапу	· · · · · ·		
	222 S.	Riverside Plaza					
			Addr	ess	•		
	Chicag	50, IL 60606					
			City/State and	l Zip Code			
	lrobelly(@revantage.com					
			(to be used for fur	ture annual	report noti	fication)	
For fur	her information co	oncerning this matter, plea	se call:				
	Leslie M. Robe	lly 	3 at (12	466-317	6	
		Name of Contact Person		Area Code	Dayt	ime Telephone Number	
	MAILING AD Division of Corp Registration Sec P.O. Box 6327 Tallahassee, FL	porations tion			Division o Registratio Clifton Bu 2661 Exec		
Enclose	d is a check for th ■ \$125.00 Filin	ne following amount: g Fee \$130.00 Filin Certificate of S		55.00 Filing fied Copy	g Fee &	☐ \$160.00 Filing Fee, Certifit of Status & Certified Copy	cate

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPHANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA:

1. BREIT Orange Manor (Name of Foreign	Limited Liability Company; must include "Limited	Liability Company," "L.L.C.," or "LLC	.")
	name adopted for the purpose of transacting business in Flori	da. The alternate name must include "Limited l	Liability Company," "L.L.C," or "LLC.")
2. Delaware	hich foreign limited liability company is organized)	3. Applied For	umber, if applicable)
(Jurisdiction under the law of w	men avergo maded matring company is deganized)	(rest in	maxi, ii applicanc)
4			
	(Date first transacted business in Florida, if prior to re (See sections 605,0904 & 605,0905, F.S. to determine		•
5. 222 S. Riverside Plaza		6. same as principal	
(Street Address of Chicago, IL 60606	Principal Office)	(Mailing A	address)
c/o Leslie Robelly			الما من الما الما الما الما الما الما ال
		· · · · · · · · · · · · · · · · · · ·	
7. Name and street addre	ss of Florida registered agent: (P.O. Box	NOT acceptable)	NED ED
Name:	Corporation Service Company		75.00
Office Address:	1201 Hays Street		A 15 5
J	Tallahassee	22201	2 01
	(City)	, Florida 32301	nyle)
designated in this applicate to comply with the provis	egistered agent und to accept service of po ation, I hereby accept the appointment as ions of all statutes relative to the proper of as of my position as registered agent. Corporation Service Company	registered agent and agree to a and complete performance of m Roxanne	ct in this capacity. I further agre y duties, and I am familiar with e Tumer
designated in this applicate comply with the provise and accept the obligation 8. The name, title or cap	acity and address of the person(s) who has	registered agent and agree to a and complete performance of m Roxanne Asst. Vice (grature) S/have authority to manage is/are	ct in this capacity. I further agree by duties, and I am familiar with Tumer President
designated in this applica to comply with the provis and accept the obligation	ition, I hereby accept the appointment as ions of all statutes relative to the proper as of my position as registered agent. Corporation Service Company By: (Registered agent's si	registered agent and agree to a and complete performance of manned Asst. Vice (grature) Shave authority to manage is/are Title or Capacity:	ct in this capacity. I further agre by duties, and I am familiar with Tumer President
designated in this applicate comply with the provise and accept the obligation 8. The name, title or cap	acity and address of the person(s) who has Name and Address: BREIT TH MHC Holdco LLC	registered agent and agree to a and complete performance of manned Asst. Vice (granture) Shave authority to manage is/are Title or Capacity:	ct in this capacity. I further agrees to duties, and I am familiar with the Tumer President Name and Address: Brian Kim
designated in this applicate comply with the provisand accept the obligation 8. The name, title or cap <u>Title or Capacity:</u>	acity and address of the person(s) who has	registered agent and agree to a and complete performance of manned Asst. Vice (grature) Shave authority to manage is/are Title or Capacity:	ct in this capacity. I further agree y duties, and I am familiar with a Tumer President Name and Address:
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Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "BREIT ORANGE MANOR MHC 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 SIXTEENTH DAY OF JANUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BREIT ORANGE MANOR MHC LLC" WAS FORMED ON THE ELEVENTH DAY OF JANUARY, A.D. 2019.

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

Authentication: 202092964

Date: 01-16-19

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