# M19000004075

(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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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195								
REFERENCE : 7875637 4358179								
AUTHORIZATION Spulledena								
COST LIMIT : \$ 130.00								
ORDER DATE : April 23, 2019								
ORDER TIME : 3:39 PM								
ORDER NO. : 737563-005								
CUSTOMER NO: 4358179								
FOREIGN FILINGS								
NAME: HRA MARINA LANDING LLC								
XXXX QUALIFICATION (TYPE: <u>LL</u> )								
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:								
CERTIFIED COPY PLAIN STAMPED COPY XX CERTIFICATE OF GOOD STANDING								
TAK CHATTICATE OF GOOD STANDING								

EXAMINER:

CONTACT PERSON: Lydia Cohen -- EXT# 62974

### COVER LETTER

		C	OVER LETTER		
TO:		ation Section n of Corporations			
SUBJE		RA MARINA LANDING LLC			
50151.	<u> </u>	Name c	of Limited Liability	Company	•
		pplication by Foreign Limited Liability Conneck are submitted to register the above ref			
Please r	eturn all	correspondence concerning this matter to the	ne following:		
			Name of Person		
			Firm/Company	_	
			т пл/Сопрану		
			Address		
		City	/State and Zip Code	<del></del>	
		emurray@horizonra.com			
	-	E-mail address: (to be us	sed for future annua	report notification)	
For furt	her infor	nation concerning this matter, please call:			
		Name of Contact Person	at ( Area Code		
		Name of Confact Person	Area Code	Daytime Telephone Number	
		NG ADDRESS: 1 of Corporations		STREET ADDRESS: Division of Corporations	
		ition Section		Registration Section	
	P.O. Bo			Clifton Building	
	Tallahas	ssee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE

## 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 HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	HRA MARINA LAND						
	(Name of Foreign	Limited Liability Company; must include "Limi	ted Liability	Company," "L.L.C.," or "L	J.C.")		
(16	name unavailable, enter alternate n	ame adopted for the purpose of transacting business in I	lorida The alte	ernate name must include "Limit	ted Liability Company," "L.L.C," or "ELC ")		
2.	DELAWARE (Jurisdiction under the law of w.)	nich foreign limited liability company is organized)	3.	(FE	I number, if applicable)		
4.	Upon filing				· · · · · · · · · · · · · · · · · · ·		
		(Date first transacted business in Florida, if prior i (See sections 605,0904 & 605,0905, F.S. to deter	to registration.) mine penalty h	ability)	<del></del>		
5.		2003 Western Avenue, Suite 445 (Street Address of Principal Office)			6. 2003 Western Avenue, Suite 445		
	(Street Address of F	metpai Omee)		(Mailin	g Address)		
	Seattle, WA 98121		5	Seattle, WA 98121			
			_		<b>1 19 1 1 1 1 1 1 1 1 1 1</b>		
7.	Name and street addres	s of Florida registered agent: (P.O. Bo	x <u>NOT</u> ac	ceptable)	NLED R 23 H		
	Name:	Corporation Service Company			4 9 20 274 FE 2040A		
	Office Address;	1201 Hays Street			, <u>, , , , , , , , , , , , , , , , , , </u>		
		Tallahassee		32301 , Florida	1		
		(Cúy)		- IZ	ip code)		

#### 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.

Corporation Service Company

By:

(Registered agent's signature)

Lydia Cohen
Asst. Vice President

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Name: HRA MANAGER LLC Manager ☐ Manager Name: 2003 Western Avenue Member Member Address: Suite 445 ☐ Authorized Authorized Seattle, WA 98121 Person Person Other\_ Other Other Other\_\_\_\_ Manager Name: \_\_\_\_\_ Manager Member Address: Member | Authorized ☐ Authorized Person Person Other\_\_\_\_ ☐Other Other Other Manager Name: \_\_\_\_\_ Name: \_\_\_\_\_ ☐ Member Address: \_\_\_\_ ☐ Mcmber Address: Authorized Authorized Person Person Other Other Other Other\_\_\_\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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. Signature of an authorized person Timothy D. Smith, Manager of HRA Manager LLC, Manager

Typed or printed name of signee

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "HRA MARINA LANDING 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 TWENTY-THIRD DAY OF APRIL, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HRA MARINA LANDING LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF APRIL, A.D. 2019.

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

Authentication: 202689721

Date: 04-23-19

7385902 8300 SR# 20193066320