

MI900005674

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H19000182534 3)))



H19000182534ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : LOWMEYER, DROBILUK, DOSTER, KANTOR & REED, P.A.
Account Number : 0727200000036
Phone : (407) 843-4600
Fax Number : (407) 843-4444

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**Foreign Limited Liability Company
Foundry Gear Miami I Developer, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Y SCOTT

JUN 11 2019

RECEIVED
19 JUN 10 PM 2:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

IN COMPLIANCE WITH SECTION 605.02, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Foundry Gear Miami I Developer, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLP")

(If name available, check name(s) have(s) adopted for the purpose of transacting business in Florida. The director name also include "Limited Liability Company," "LLC," or "LLP.")

2. Delaware

(State of incorporation of the foreign limited liability company; must include "State of")

3. Applied for:

(Name of person applying for registration)

4. Upon qualification

(Date of qualification; must include month, day, and year; if date is registration, see 605.02, Florida Statutes, F.S. to determine date of registration)

5. 420 S. Orange Avenue, Suite 950

(Mailing address of principal office)

Orlando, Florida 32801

6. 420 S. Orange Avenue, Suite 950

(Mailing address of principal office)

Orlando, Florida 32801

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

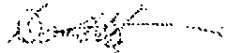
Name: NRAI Services, Inc.

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324

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.



Donna Peterson-Riggs, Assistant Secretary

(Registered agent's signature)

FILED
2019 JUN 10 PM 4:35
CLERK OF CIRCUIT COURT
MIAMI-DADE COUNTY
FLORIDA

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:
☒ Manager Name: Foundry Commercial, LLC
☒ Member Address: 420 S. Orange Avenue
 Suite 950
☐ Authorized Person Orlando, Florida 32801
☐ Other ☐ Other

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized Person _____
☐ Other ☐ Other

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized Person _____
☐ Other ☐ Other

Title or Capacity: Name and Address:
☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized Person _____
☐ Other ☐ Other

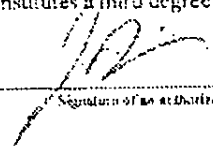
☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized Person _____
☐ Other ☐ Other

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized Person _____
☐ Other ☐ Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed 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
 Jason S. Rimes

 Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "FOUNDRY GEAR MIAMI I DEVELOPER, 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 TENTH DAY OF JUNE, A.D. 2019.

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

2019 JUN 10 PM 4:36
TALLAHASSEE FLORIDA



7451916 8300

SR# 20195337360

You may verify this certificate online at corp.delaware.gov/authver.shtmlA handwritten signature in black ink, appearing to read "JBULLOCK", written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202991513

Date: 06-10-19