

**M1900006261**

## 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.

(((H19000198375 3)))



H190001983753ABCA

**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 : KATZ BARRON  
Account Number : 072627002473  
Phone : (305) 856-2444  
Fax Number : (305) 860-2588

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

Email Address: ssm @Katzbarron.comForeign Limited Liability Company  
Bal Harbour Shops, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

Z BROWN

JUN 27 2019



June 27, 2019

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

KATZ BARRON

SUBJECT: BAL HARBOUR SHOPS, LLC  
REF: W19000060332

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.," also are no longer acceptable.

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.

Zakiya M Brown  
Regulatory Specialist II

FAX Aud. #: H19000198375  
Letter Number: 619A00013054



901 Ponce de Leon Boulevard  
Tenth Floor  
Coral Gables, Florida 33134  
—  
Phone/ 305 856 2444  
Fax/ 305 860 2588

June 27, 2019

Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

Re: **Bal Harbour Shops, LLC (a Delaware LLC)**  
**Fax Audit #H190001983753**  
**Ref #W19000060332**  
**Ltr #619A00013054**

To whom it may concern:

Bal Harbour Shops, LLLP (now known as Whitman Family Properties, LLLP); Bal Harbour Shops, Inc.; Bal Harbour Shops (tradename) are all related entities. They hereby allow Bal Harbour Shops, LLC (a Delaware corporation) to qualify in Florida.

Should you have any questions, please call me (305) 856-2444.

Very truly yours,

A handwritten signature in black ink, appearing to read 'Michael D. Katz'.

Michael D. Katz, Esq., President of Corpco, Inc.,  
and as legal counsel for Bal Harbour Shops, LLLP (n/k/a Whitman Family Properties, LLLP);  
Bal Harbour Shops, Inc.; and the tradename Bal Harbour Shops

#190001983753

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:

1. Bal Harbour Shops, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC."

Delaware

84-1868027

2. (Jurisdiction under the law of which foreign limited liability company is organized)

3. (FEI number, if applicable)

4. (Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 420 Lincoln Road  
(Street Address of Principal Office)

6. 420 Lincoln Road  
(Mailing Address)

Suite #320

Suite #320

Miami Beach, FL 33139

Miami Beach, FL 33139

FILED  
JUN 26 PM 1:50

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

Name: Corpro, Inc.

Office Address: 901 Ponce de Leon Blvd., 10th Floor

Coral Gables, Florida 33134  
(City) (Zip 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.

  
(Registered agent's signature)

#190001983753

H190001583753

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]:


<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: Bal Harbour Shops, LLLP	<input type="checkbox"/> Manager	Name: _____
<input checked="" type="checkbox"/> Member	Address: 420 Lincoln Road	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	Suite #320	<input type="checkbox"/> Authorized	_____
Person	Miami Beach, FL 33139	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

FILED  
JUN 26 PM 1:30

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

Erica L. English, Esq., as authorized agent of Bal Harbour Shops, LLC

\_\_\_\_\_  
Typed or printed name of signee

H190001983753

H190001983753

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BAL HARBOUR SHOPS, 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 FOURTEENTH DAY OF JUNE, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BAL HARBOUR SHOPS, LLC" WAS FORMED ON THE FIRST DAY OF APRIL, A.D. 2019.


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



7353764 8300

SR# 20195449476

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State

Authentication: 203029677

Date: 06-14-19

H190001983753