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CORPORATION SERVICE COMPANY
1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	1200000001	.95		
	REFERENCE	:	862644	7604215		
	AUTHORIZATION	:	Smel	Elema	'~	
	COST LIMIT	:	111			
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ORDER DATE :	July 26, 2019					
ORDER TIME :	9:15 AM				ZOI TAL) }
ORDER NO. :	862644-020				SECRITARY ALLAHASSE	٦.
CUSTOMER NO:	7604215				1.1	
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	<u>FOREIGN</u> F	<u>'ILII'</u>	<u>vgs</u>	· ·	PH 4: 43	
NAME:	OWM POMPANO B	EACI	H FL LANDLO	ORD,		

EXAMINER:

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CONTACT	PERSON	V:	Amanda	Robi	.nsc	n	EXT‡	6296	8

XXXX QUALIFICATION (TYPE: LL)

COVER LETTER

	stration Section sion of Corporations	
SUBJECT:	OWM Pompano Beach Fl	_ Landlord, LLC
		Name of Limited Liability Company
		nited Liability Company for Authorization to Transact Business in Florida," Certificate of ister the above referenced foreign limited liability company to transact business in Florida.
Please return	all correspondence concerni	ng this matter to the following:
	Allison McLeod	
		Name of Person
	SunTrust Equity Fundi	ng, LLC
	3333 Peachtree Road	Firm/Company ASSE P
		Address
	Atlanta, Georgia 3032	FATE 43
		City/State and Zip Code
	karen.king@suntrust.c	om
	E-mail	address: (to be used for future annual report notification)
For further in	formation concerning this ma	atter, please call:
Kare	en King	at (404) 439-7662
	Name of Perso	
Divi: Regi P.O.	sion of Corporations stration Section Box 6327 thassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
		ng amount: 0.00 Filing Fee & Status S

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: OWM Pompano Beach FL Landlord, 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 and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) N/A (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 3333 Peachtree Road, 10th Floor, MC 3951 Atlanta, Georgia 30326 (Street Address of Principal Office) 3333 Peachtree Road, 10th Floor, MC 3951 Atlanta, Georgia 30326 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Allison McLeod, Manager, 3333 Peachtree Road, 10th Floor, MC 3951, Atlanta, Georgia 30326

8. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

Allison McLeod

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of	of the Limited Liability (Company is:		
OWM Pompan	no Beach FL Landlord, LLC	·		
If unavailable	, the alternate to be used	in the state of Florida is:	2019 JI SECK TALLA	-T)
2. The name	and the Florida street add	dress of the registered agent and office are:	L 29 HASSE	F
	Corporation Service Co	mpany	PH 4	O
		(Name)	4: 43 STATE LORID	
	1201 Hays Street		P	
	Florida Stre	et Address (P.O. Box NOT ACCEPTABLE)	_	
	Tallahassee	FL 32301		
		City/State/Zip	_	

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

Corporation Ser By:	vice Company	Jum	Roxanne Turner Asst. Vice President
	(Signature)		

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "OWN POMPANO BEACH FL LANDLORD, 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-NINTH DAY OF JULY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OWM POMPANO BEACH FL LANDLORD, LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF JULY, A.D. 2019.

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

FILED
2019 JUL 29 PM 4: 43
SECRE JARY OF STATE
TALLAHASSEE, FLORIDA



Authentication: 203302789

Date: 07-29-19