## M19000009416

Office Use Only



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19 OCT -2 PM 2: 08

2019 OCT -2 AH 11: 34

BKINSEY OCT -3 7019 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 941463 4346784

AUTHORIZATION : (

COST LIMIT : \$ 125.00

ORDER DATE : October 2, 2019

ORDER TIME : 1:21 PM

ORDER NO. : 941463-010

CUSTOMER NO: 4346784

FOREIGN FILINGS

NAME: POMPANO PARK JV LAND HOLDINGS,

LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY XX PLAIN STAMPED COPY

\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62968

EXAMINER: \_\_\_\_

## **COVER LETTER**

TO:		ition Section of Corporations								
SUBJE		MPANO PARK J	V LAND HOLDINGS, LL	С						
			Name of I	Limited Liability	Сотрапу	_				
					ation to Transact Business in Florida, ited liability company to transact busi					
Please r	eturn all d	correspondence co	ncerning this matter to the	following:						
		Devin Kitchelt								
			Na	ame of Person		-				
		Pompano Park J	V Land Holdings, LLC							
	Firm/Company									
			-							
	Baltimore, MD 21202									
			City/St	ate and Zip Code		-				
	•	dkitchelt@cordish	.com							
	_		E-mail address: (to be used	for future annua	l report notification)	-				
For furt	her inform	nation concerning	this matter, please call:							
	Devin k	Citchelt		410 at (	752-5444					
		Name of	Contact Person	Area Code	Daytime Telephone Number	-				
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314				STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301					
			: following amount: e to: FLORIDA DEPART	MENT OF STA	ATE					
	_	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Sta	: 🔲 <b>\$</b> 155.00	O Filing Fee & \$160.00 Filing of Status & Ce					

## 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:

	ame adopted for the purpose of transacting business in Flo	rida. The al	ternate name must inclu	de "Limited Liability	Company,"	"L.L.C," or "	I.LC.
Delaware		2					
(Jurisdiction under the law of w	tich foreign limited liability company is organized)	3.	<del></del>	(FEI number, if	applicable)		_
N/A							
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determine	ne penalty	L) liabiluy)				
251 Little Falls Drive		_	601 E. Pratt S	treet, 6th FL			
(Street Address of	Principal Office)	0.		(Mailing Address)			
Wilmington, DE 1980	08		Baltimore, MD	21202			
			Attn: General Counsel				
Name and street address	ss of Florida registered agent: (P.O. Box	NOT.	acceptable)				
	Corporation Service Company				; ;	2019 0C1	
Name:	1201 Hays Street		<del>_</del>			OT -2	
Name: Office Address:				32301 (Zip code)		AH II: 31	
	Tallahassee (Cip)		, Florida				

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: Devin Kitchelt Name: \_\_\_\_\_ Manager ■ Manager Address: \_\_\_\_\_601 E. Pratt Street, 6th FL Member Address: Baltimore, MD 21202 Authorized ☐ Authorized Person Person Other\_ Other\_\_\_\_ Other\_\_\_ ☐Other\_\_\_\_\_ Manager Name: ■ Manager Name: \_\_\_\_\_ Address: \_\_\_\_ ■ Member ☐ Member Address: \_\_\_\_\_ Authorized Authorized Person Person Other. Other\_\_\_\_ Other\_\_\_\_ Other Manager Name: Name: \_ Member Address: ☐ Member 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.



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

DELAWARE, DO HEREBY CERTIFY "POMPANO PARK JV LAND HOLDINGS, 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 SECOND DAY OF OCTOBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "POMPANO PARK JV LAND HOLDINGS, LLC" WAS FORMED ON THE EIGHTH DAY OF JULY, A.D. 2019.

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

Authentication: 203709206

Date: 10-02-19