W2100004888

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
□ ¤CK-J	MAIL MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	s to Filing Officer





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SECRETARY OF STATE
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CORPORATE ACCESS, ____

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: 4/23 Glinda

	CERTIFIED COPY	<u> </u>	
XX	РНОТОСОРУ	· · · · · · · · · · · · · · · · · · ·	
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кх	FILING	LLC	
K	AGR Navarre 8990, LL	C	
	ORPORATE NAME AND DOCU		5.5
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COVER LETTER

SUBJECT:	AGR Navarre	8990, LLC		
		8990, LLC	of Limited Liability Comp	Dany
				to Transact Business in Florida," Certific ability company to transact business in F
Please return ali	corresponden	ce concerning this matter to	the following.	and the company to transact business in F
	hrika Yess			
			Name of Person	
	Kayne Ande	rtson Real Estate Advisors, I	1,C	
			Firm Company	
	One Town (enter Road, STE 300		
			Address	
	Boca Raton,			
		•	State and Zip Code	
	yessa kaynee			. 1
		f;-mail address; (to be us	ed for future annual report	notification)
or further inform	ation concern	ing this matter, please call.		
Frika Ye	58		561 300-	6285 Daytime Telephone Number
	Name	of Contact Person	Area Code L	Daytime Telephone Number
Division (Registrati P.O. Box l'allahasse	G ADDRESS of Corporation on Section 6327 ee, FL 32314	<u>:</u> :s	STRE Divisio Registr Clifton 2661 E	ET ADDRESS: on of Corporations ration Section Building Executive Center Circle assee, F4, 32301
octosed is a check □ \$125.00	, for the follow) Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155,00 Filing Fee & Certified Copy	☐ \$160.00 Filing Lee, Certificate of Status & Certified Copy

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

IN COMPLEASO, WITH SECTION (05/090), FLORIDASTARCHEN THE FORLOWING INSURABILITY TO REGISTER A FOREIGN ALMITED (FABILITY

L. KAGR Navarre 8990), LL,¢		
(Name of Fo	oreign Limited Liability Company; must inclu-	de "Limited Liability Company," "LLC," or "LC"	
10 name unavaidable, enter Etability Company 2 of 1 a	alternate name adopted for the purpose of train	osacting business in Horida. The alternate name must	
Delaware	C 01711.)	are are an emission of the master and the master an	include "Limited
	w of which foreign limited liability		
company is organized)	w of which foreign limited liability	(FIJ number, if applicable)	<u>-</u>
L UPON FILING		- · · · · · · · · · · · · · · · · · · ·	
	(Date first transacted business in Uke (See sections 605,0904 & 605,0905).		
and Carrier and	(See sections 605,0904 & 605,0905).	ortua, il prior to registration i S. lo determine penalty hability i	
c o Nayne Anderson	ivear corate Wildsolf 110.		
One Town Center Ros	ad, STF 300, Boca Raton, FL 33486		
	(Street Address of being)	(M) an	
c o Kayne Anderson R	leal Estatu A. L. T		
			- `
one Town Center Roa	33486 Ed. 33486		
	(Mailing Address)		
Name and street addres	ss of Florida registered agent: (P.O. Box	Neve	
Name:	NRAI Services, Inc.	(SOFT acceptable)	
		······································	•
Office Address:	F200 South Pine Island Road		•
	Plantation	—————	. •
	(City)	. Florida <u>33324</u>	
egistered agent's accept	anon	(Zio anter	
is application, I hereby a th the provisions of all si e obligations of my positi Bs	ion as registered agent. NRAL Survivor	ocess for the above stated corporation at the pla it and agree to act in this capacity. I further ag te performance of my duties, and I am familiar line.	ce designated in ree to comply with and accept
	(Registered agent)	signature)	
The name, title or capac	ity and address of the person(s) who has/h	Janne C	el tizit, 11 swl.D.
regan l' Mousi, Authoriz	red Person	ave authority to manage is are:	
own Center Road, Suite			
ca Raton, FL 33486			
Hached is a certificate of idiction under the law of the translator must be sub-	existence, no more than 90 days old, duly which it is organized. (If the certificate is nitred)	authenticated by the official having custody of in a foreign language, a translation of the certific	records in the
Single Single			
-	MUCHAN ME Signature of an author	Florida Statutes. I am aware that any talse inform	

Typed or printed name of signee

THE TO LESS 2015 Western K. WHERE FROME



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

DELAWARE, DO HEREBY CERTIFY "KAGR NAVARRE 8990, 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-SECOND DAY OF APRIL, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "KAGR NAVARRE 8990, LLC" WAS FORMED ON THE NINETEENTH DAY OF APRIL, A.D. 2021.

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

at corn delaware gov/au

Authentication: 203031305

Date: 04-22-21