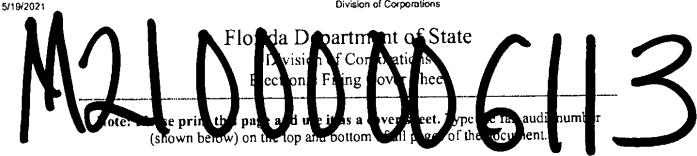
Division of Corporations



(((H21000200213 3)))



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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 : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338 Phone Fax Number : (954)208-0845

\*\*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 Naples Beach Club Land Trust Trustee, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

MAY 20 2021

<del>M: SOLOMON</del>

Electronic Filing Menu

Corporate Filing Menu

Help

To: 18506176383

From: Ranae McGrav

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

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	aine adopted for the purpose of transacting business in He	suda. The altern	ate name must include "Limited Liability Com	pany," "L.L.C," (* "l
Delaware		3		
(Jurisdiction under the law of w	nich toreign limited liability company is organized)	J	(FEI number, if applied	able)
Upon filing				
	(Date first transacted business in Florida, if prior to (See sections 605 0901 & 605 0905, F.S. to determi	registration )	nts )	
645 Fifth Avenue, 21s			5 Fifth Avenue, 21st Floor	
ser Address of Principal Office)		6	(Mailing Address)	
New York, NY 10022		Ne	w York, NY 10022	32 (A)
				3+ (d)
				5.2
		<del></del>		207 207 20 A
Name and street addre	ss of Florida registered agent; (P.O. Box	<u>NOT</u> acce	eptable)	7
	STO			
Name:	C T Corporation System			****
	1200 South Pine Island Road			
			<del></del>	
Office Address:				
Office Address:	Plantation		33324 , Florida	

(Registered agent's signature)

From: Ranae McGrav

2021-05-19 07:38:15 C\$T

Tist Committee	Name and Address	Title or Canacity:	Name and Address:
manage [up to six (6) total]:	200 1130 1140 1140 1140 1140 1140 1140 11	,	J ,
8. For initial indexing numose	es, list names, title or capacity and	l addresses of the primary members	/managers or persons authorized to

Title or Capacity:	Name and Address:	Title or Capacity:	-	Name and Address:	
□Manager	Name: Kenneth Gerold	☐ Manager	Name:		_
□Member	Address:	□ M <b>e</b> mber	Address:		_
■ Authorized	645 Fifth Avenue, 21st Floor	☐ Authorized			_
Person	New York, NY 10022	Person			_
□Other		Other		Other	_
□Manager	Name:	□Manager	Name:		_
□Member	Address:	□Member	Address:		_
□Authorized		☐ Authorized		282	_
Person		Person		AH X	
□Other			<del></del>	□Other PR	
□Manager	Name:		Name:		_ _
□Member	Address:	□ Member	Address:		_
☐Authorized		Authorized			_
Person		Person			_
□ Orbor	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.

M_ L_		
/	Signature of an authorized person	
Kenneth Gerold		

Typed or printed name of signer



Page 1

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

DELAWARE, DO HEREBY CERTIFY "NAPLES BEACH CLUB LAND TRUST TRUSTEE,

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 NINETEENTH DAY OF MAY, A.D. 2021.

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

Authentication: 203238548

Date: 05-19-21