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.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

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	Division of Corporations			
	Fax Number : (850)617-6383			
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	Account Name : FLAGLER DEVELO	JPMENI GROUP, LLC		
	Account Number : I20020000144 Phone : (305)520-2344			(3 💊
	Phone : (305)520-2344 Fax Number : (305)520-2400		;	3 3
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Electronic Filing Menu

Corporate Filing Menu

Help

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## COVER LETTER

TO:							
617 (10 7 7	FG	L Property Company LLC					
SUBJE	sc 1:	Name	of Limited Liability Co	mpany			
The en Exister	closed "A nce, and cl	pplication by Foreign Limited Liability C heck are submitted to register the above r	Company for Authorization of the Company for Authorization of the Company of the	on to Transact Business i d liability company to tra	in Florida,' insact busi	' Certiñ ness in I	cate of Florida
Please	return all	correspondence concerning this matter to	o the following:				
		Jessica Perez					
			Name of Person				
			Firm/Company				
		Name of Limited Liability Company ed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of and check are submitted to register the above referenced foreign limited liability company to transact business in Florida and correspondence concerning this matter to the following:  Jessica Perez  Name of Person					
			Address				
		Miami, FL 33136	Address  City/State and Zip Code  City/State and Zip Code  City/State and Zip Code  Area Code  Street Address:  Registration Section  Division of Corporations  The Centre of Tallahassee  2415 N. Monroe Street, Suite 810  Tallahassee, FL 32303  Cutting Fee & S155.00 Filing Fee, Certificate  Street Address  Street Address:  Registration Section  Division of Corporations  The Centre of Tallahassee  2415 N. Monroe Street, Suite 810  Tallahassee, FL 32303				
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For it	urther info	rmation concerning this matter, please ca	all:			ተ፡ተ	ij
	Jessica	a Perez	, <del>-</del> -	)	ri.,	_ _	
		Name of Contact Person		Daytime Telephone	Number :		
	Regis Divis P.O.	stration Section sion of Corporations Box 6327	Registration Se Division of Co The Centre of 2415 N. Monre	orporations Tallahassee oe Street, Suite 810			
	Please	e make check payable to: FLORIDA DE 25.00 Filing Fee S130.00 Filing F	ee & 🔲 \$155.00 Fill	ing ree & 3100.00	) Filing Fee Status & Co	e, Certif ertified	iicate Copy

## 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 HABILITY

COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: FGL Property Company LLC (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LL.C.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC.") Delaware (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florids, if prior to registration.)
[See sections 605 0904 & 605 0905, F.S. to determine penalty liability) 700 NW 1st Avenue, Suite 1620 700 NW 1st Avenue, Suite 1620 6. (Mailing Address) (Street Address of Principal Office) Miami, FL 33136 Miami, FL 33136 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Kolleen O.P. Cobb, Esq. Name: 700 NW 1st Avenue, Suite 1620 Office Address: Miami

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.

	APCab
(Reg	vacced agent's signature)

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:		
□Manager	Name:	⊡Manager	Name: Mauricio Anderson		
·	700 NW 1st Avenue Address:	□Member	Address:		
□Member	Suite 1620	□Authorized	Suite 1620		
□Authorized	Miami, FL 33136	Person	Miami, FL 33136		
Person P Other	Other	© Other			
□Manager	Name: Kolleen Cobb	□Manager	Name:		
□Member	Address:	□Member	Address:		
□Authorized	Suite 1620	□Authorized	Suite 1620 Miami, FL 33136		
Person	Miami, FL 33136	Person			
■Other_VP, S		■Other	7.5.1		
□Manager	Name:	□Managet	Name:		
□Member	Address:	□Member	Address (Trans		
□Authorized	Suite 1620	□Authorized	Address. For E		
Person	Miami, FL 33136	<b>r</b> .			
■Other	Other	Other	□Other		

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.

Sonal-		
- 4-01 CNO	Signature of an authorized person	-
Kolleen O.P. Cobb, Vi	ice President	_
	Typed or printed name of signee	



Page 1

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

DELAWARE, DO HEREBY CERTIFY "FGL PROPERTY COMPANY LIC" 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 THIRD DAY OF JUNE, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FGL PROPERTY

COMPANY LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF JANUARY, A.D.

2014.

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



Authentication: 203361043

Date: 06-03-21