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to 212 2021

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT	NO	,
ACCOONT	110.	•

: I2000000195

REFERENCE : 016968

8133117 Louis de man

AUTHORIZATION

COST LIMIT : \$ 13'0.00

ORDER DATE : September 20, 2021

ORDER TIME : 8:34 AM

ORDER NO. : 016968-015

CUSTOMER NO: 8133117

FOREIGN FILINGS

NAME: DANIA BEACH APTS PREFERRED II, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY

XX ____ PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

COVER LETTER

TO: Registration Section Division of Corporations

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Dania Beach Apts Preferred II, LLC SUBJECT:

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Luis Bethencourt		
	Name of Person	
Royal Palm Companies		
	Firm/Company	
1010 NE 2nd Ave		
	Address	
Miami, FL 33132		
C	ity/State and Zip Code	
luis@rpcholdings.com		
E-mail address: (to be	used for future annual r	eport notification)
or further information concerning this matter, please call	!:	
Luis Bethencourt	786 at (868-0363
Name of Contact Person	Area Code	Daytime Telephone Number
Mailing Address:	Street Address:	
Registration Section	Registration Sec	tion
Division of Corporations	Division of Cor	
P.O. Box 6327	The Centre of T	allahacee
		ananassuu

Enclosed is a check for the following amount:

Tallahassee, FL 32314

Please make check payable to: FLORIDA DEPARTMENT OF STATE

\$125.00 Filing Fee	🗐 🚍 \$130.00 Filing Fee & 🛛 🔲	\$155.00 Filing Fee &	\$160.00 Filing Fee, Certificate
	Certificate of Status	Certified Copy	of Status & Certified Copy

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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:

I. Dania Beach Apts Preferred II, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC.," or "LLC.")

Delaware	name adopted for the purpose of transacting business in l		87-2211002	ing conquery, L.L.C. of LL
(Jurisdiction under the law of v	which foreign limited liability company is organized)	3	(FEI number,	if applicable)
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registratio	a.) / liability)	
1010 NE 2nd Ave		6	1010 NE 2nd Ave	
reet Address of Principal Office)	- · · <u> · · - · - · - · - · - ·</u>	6.	(Mailing Address)	
Miami, FL			Miami, FL	
33132			33132	<u> </u>
Name and street addres	s of Florida registered agent: (P.O. Box	: <u>NOT</u> 8	acceptable)	, Ers
Name:	Corporation Service Company			2
Office Address:	1201 Hays Street			/*i 0;
	Tallahassee		32301 , Florida	ය ප
	(City)		(Zip code)	

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.

Corporation Service Company xxis Weiterd Ø By: assistant va president (Registered agent's signature)

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
□Manager	Name:	□Manager	Name:
Member	Address:	Member	Address:
Authorized	Miami, FL	Authorized	Miami, FL
Person	33132	Person	33132
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
⊡Member	Address:	□Member '	Address:
□Authorized		Authorized	
Person	······	Person	
□Other	Other	DOther	Other
□Manager	Name:	Manager	Name:
□Member	Address:	□Member	Address:
Authorized		Authorized	
Person		Person	
Other	Other	Other	□Other

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]:

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 forcign 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.

rNam	MX	
Sergio Moises	S gnature of an authorized person	
	Typed or printed name of signee	



Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DANIA BEACH APTS PREFERRED II, 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 TWENTIETH DAY OF SEPTEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DANIA BEACH APTS PREFERRED II, LLC" WAS FORMED ON THE NINTH DAY OF AUGUST, A.D. 2021.

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





Authentication: 204203814

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