

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614) 280-3338  
Fax Number : (954) 203-0845

Please Honor Original  
Date 10/18/2021

\*\*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  
GVI/GC Bradenton Sunset Village Owner, LLC

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

2021 OCT 18 PM 1:48  
SECRETARY OF STATE  
TALLAHASSEE, FL 32304

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2021 OCT 27 AM 16:45

TALLAHASSEE, FL 32304

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Corporate Filing Menu

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OCT 28 2021

K. Brumbley

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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:

1. GVLIC Bradenton Sunset Village Owner, LLC  
(Name of Foreign Limited Liability Company must include "Limited Liability Company," "LLC," or "LLC")

(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")

2. Delaware 3. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 900 North Michigan Avenue, Suite 1450 6. c/o GEM Realty Capital, Inc.  
(Street Address of Principal Office) (Mailing Address)  
Chicago, Illinois 60611 900 North Michigan Avenue, Suite 1450  
Chicago, Illinois 60611

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation System  
Office Address: 1200 South Pine Island Road  
Plantation Florida 33324  
(City) (zip code)

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TALLAHASSEE, FLORIDA

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.

By: CT Corporation System Kaity Toon by Kaity Toon, Asst. Sect.  
(Registered 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:	
<input type="checkbox"/> Manager	Name:	Darryl A. Mallin		<input type="checkbox"/> Manager	Name:	Morgan S. Geller	
		c/o GEM Realty Capital, Inc.				c/o GEM Realty Capital, Inc.	
<input type="checkbox"/> Member	Address:	900 North Michigan Avenue, Suite 1450		<input type="checkbox"/> Member	Address:	900 North Michigan Avenue, Suite 1450	
		Chicago, IL 60611				Chicago, IL 60611	
<input checked="" type="checkbox"/> Authorized	Signatory			<input checked="" type="checkbox"/> Authorized	Signatory		
	Person				Person		
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
<input type="checkbox"/> Manager	Name:	Michael A. Elia		<input type="checkbox"/> Manager	Name:	Craig R. Catfelli	
		c/o GEM Realty Capital, Inc.				c/o GEM Realty Capital, Inc.	
<input type="checkbox"/> Member	Address:	900 North Michigan Avenue, Suite 1450		<input type="checkbox"/> Member	Address:	900 North Michigan Avenue, Suite 1450	
		Chicago, IL 60611				Chicago, IL 60611	
<input checked="" type="checkbox"/> Authorized	Signatory			<input checked="" type="checkbox"/> Authorized	Signatory		
	Person				Person		
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
<input type="checkbox"/> Manager	Name:	Jonathan C. Romick		<input type="checkbox"/> Manager	Name:	Eric Siegel	
		c/o GEM Realty Capital, Inc.				c/o GEM Realty Capital, Inc.	
<input type="checkbox"/> Member	Address:	900 North Michigan Avenue, Suite 1450		<input type="checkbox"/> Member	Address:	900 North Michigan Avenue, Suite 1450	
		Chicago, IL 60611				Chicago, IL 60611	
<input checked="" type="checkbox"/> Authorized	Signatory			<input checked="" type="checkbox"/> Authorized	Signatory		
	Person				Person		
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> 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.



Signature of an authorized person

Jonathan C. Romick

Typed or printed name of signer


Delaware  
The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "GVI/GC BRADENTON SUNSET VILLAGE OWNER,  
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-EIGHTH DAY OF SEPTEMBER, A.D.  
2021.

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



  
Jeffrey W. Bullock, Secretary of State

6261757 8300

SR# 20213369323

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 204275170

Date: 09-28-21