112200000107

(Requestor's Name)
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PICK-UP WAIT MAIL
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RECEIVED

K. SALY JAN 24 2022 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 424724 / 8176152

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: January 20, 2022

ORDER TIME : 5:39 PM

ORDER NO. : 424124-010

CUSTOMER NO: 8176152

FOREIGN FILINGS

NAME: SIF II TAMPA PIONEER PARK LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

COVER LETTER

TO:

SIF II Tampa Pioneer Park LLC		
CCT:Nam	e of Limited Liability Company	
	Company for Authorization to Transact Business in Florida," Cert referenced foreign limited liability company to transact business in	
return all correspondence concerning this matter to	o the following:	
	Name of Person	
	Firm/Company	
	· min company	
 	Address	
c	City/State and Zip Code	
E-mail address: (to be	e used for future annual report notification)	
rther information concerning this matter, please cal		
	at ()	
Name of Contact Person	Area Code Daytime Telephone Number	
Mailing Address:	Street Address:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEP	PARTMENT OF STATE	
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee		

APPLICATION BY FOREIGN LIMITED EIABILITY 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:

(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Limited Liability Company, must include "Limited l	Liability Company," "L.E.C.," or "LLC")	
(If name unavailable, enter alternate	name adopted for the purpose of transacting business in Flor	ida. The alternate name must include "Limited Liability C	ompany," "L.L.C," or "LLC."}
Delaware 2.		87-4514244	
(Jurisdiction under the law of which foreign limited liability company is organized)		3(FEI number, 11 app	plicable)
4	(Date first transacted business in Florida, if prior to re	dicemba I	
	(See sections 605 0904 & (605 0905, F.S. to determine	penalty liability)	
730 Third Avenue		730 Third Avenue	
5 . (Street Address of Principal Office)		6. (Mailing Address)	·
New York, NY 10017	7	New York, NY 10017	
Name:	ss of Florida registered agent: (P.O. Box) Corporation Service Company	<u></u>	TIER JAH 21 PH 12: 19
	1201 Hays Street		
Office Address:			F 7
Office Address:	Tallahassee	 32301 Florida	1A12: 19
Office Address:			12: 19 TALE DAIDA

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: Name: ____ Name: Louis Bauer □Manager □Manager 2300 N. Field St 8500 Andrew Carnegie Blvd □Member Address: \ □Member Suite 1650 Charlotte, NC 28262 Authorized ■ Authorized Dallas TX 75201 Person Person \square Other Other □Other__ □Other Graham Catlin Michael Swink □Manager □Manager Address: ___ 333 West Wacker Drive □Member □ Member Chicago, IL 60606 Johns Creek, GA 30022 ■ Authorized Authorized Person Person □Other □Other____ □Other_ □Other Name: _ Brad Simpkins □Manager □Manager Address: 8500 Andrew Carnegie Blvd □Member □Member Address: Charlotte, NC 28262 **■**Authorized ☐ Authorized Person Person □Other □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.

> (1) Oud Henderson Signature of an authorized person

> > Wendy Henderson
> >
> > Typed or printed name of signce

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SIF II TAMPA PIONEER PARK 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 JANUARY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SIF II TAMPA

PIONEER PARK LLC" WAS FORMED ON THE TWENTIETH DAY OF DECEMBER, A.D.

2021.

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





Authentication: 202441238

Jeffrey W. Bullock, Secretary of State

Date: 01-20-22

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