

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

((H22000040451 3)))



H220000404513ABCS

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 : NRAI SERVICES, LLC
 Account Number : I20080000104
 Phone : (302)674-4089
 Fax Number : (302)674-5266

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: djanecek@crescentheights.com

2022 JAN 31 PM 12:41
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILED

Foreign Limited Liability Company
OZPC NO. 1 2900 BISCAYNE BLVD, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

2022 JAN 31 PM 3:53

H22000040451 3

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. OZPC NO. 1 2900 BISCAYNE BLVD, LLC

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

2. DELAWARE

(Jurisdiction under the law of which foreign limited liability company is organized)

3.

(FEI number, if applicable)

4. 1/28/2022

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

5. 2200 BISCAYNE BOULEVARD

(Street Address of Principal Office)

MIAMI, FLORIDA 33137

6. 2200 BISCAYNE BOULEVARD

(Mailing Address)

MIAMI, FLORIDA 33137

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

Name: JONATHAN NEWBERG

Office Address: 2200 BISCAYNE BOULEVARD

MIAMI

(City)

, Florida 33137

(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.

/s/Jonathan Newberg

(Registered agent's signature)

FILED
2022 JAN 31 PM 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H22000040451 3

H22000040451 3

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]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: JONATHAN NEWBERG	<input type="checkbox"/> Manager	Name: SHLOMO DACHOH
<input type="checkbox"/> Member	Address: 2200 BISCAYNE BLVD	<input type="checkbox"/> Member	Address: 2200 BISCAYNE BLVD
<input type="checkbox"/> Authorized	MIAMI, FL 33137	<input type="checkbox"/> Authorized	MIAMI, FL 33137
Person		Person	
<input checked="" type="checkbox"/> Other PRES	<input type="checkbox"/> Other	<input checked="" type="checkbox"/> Other SEC	<input type="checkbox"/> Other
<input type="checkbox"/> Manager	Name: CHRISTOPHER PALERMO	<input type="checkbox"/> Manager	Name: PABLO DE ALMAGRO
<input type="checkbox"/> Member	Address: 2200 BISCAYNE BLVD	<input type="checkbox"/> Member	Address: 2200 BISCAYNE BLVD
<input type="checkbox"/> Authorized	MIAMI, FL 33137	<input type="checkbox"/> Authorized	MIAMI, FL
Person		Person	
<input checked="" type="checkbox"/> Other VICE PRES	<input type="checkbox"/> Other	<input checked="" type="checkbox"/> Other TREAS	<input type="checkbox"/> Other
<input type="checkbox"/> Manager	Name: CHANTAL DEVOS	<input type="checkbox"/> Manager	Name:
<input type="checkbox"/> Member	Address: 2200 BISCAYNE BLVD	<input type="checkbox"/> Member	Address:
<input type="checkbox"/> Authorized	MIAMI, FL 33137	<input type="checkbox"/> Authorized	
Person		Person	
<input checked="" type="checkbox"/> Other VICE PRES	<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.

/s/Jonathan Newberg

Signature of an authorized person

JONATHAN NEWBERG, PRESIDENT

Typed or printed name of signer

H22000040451 3

H22000040451 3

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OZPC NO.1 2900 BISCAYNE BLVD, 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 THIRTY-FIRST DAY OF JANUARY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OZPC NO.1 2900 BISCAYNE BLVD, LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF JANUARY, A.D. 2022.

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



6578480 8300

SR# 20220302428

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202527426

Date: 01-31-22

H22000040451 3