

8/12/22, 3:28 PM

Division of Corporations

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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 : FLAGLER DEVELOPMENT GROUP, LLC
Account Number : I20020000144
Phone : (305)520-2344
Fax Number : (305)520-2400

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

Email Address: _____

2022 7 12 11 3:56

2022 AUG 12 PM 1:30

Foreign Limited Liability Company
Brightline Florida Holdings LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

S. ROBERTS

AUG 12 2022

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Brightline Florida Holdings LLC
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:

Jessica Perez
Name of Person

Firm/Company

700 NW 1st Avenue, Suite 1620
Address

Miami, FL 33136
City/State and Zip Code

kolleen.cobb@feci.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jessica Perez at (305) 520-2366
Name of Contact Person Area Code Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status \$155.00 Filing Fee & Certified Copy \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0912, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Brightline Florida Holdings 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. 88-3588388
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI 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. 350 NW 1st Avenue, Suite 200 350 NW 1st Avenue, Suite 200
(Street Address of Principal Office) (Mailing Address)
Miami, FL 33128 Miami, FL 33128

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

Name: Kolleen O.P. Cobb, Esq.
Office Address: 700 NW 1st Avenue, Suite 1620
Miami, Florida 33136
(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.

[Signature]
Registered agent's signature

2022 AUG 12 PM 1:30
FAXED
FAX

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:

Manager Name: Patrick W. Goddard

Member Address: 350 NW 1st Avenue

Authorized Suite 200

Miami, FL 33128

 Person _____

Other ^P _____ Other _____

Title or Capacity: Name and Address:

Manager Name: Jeffrey C. Switek

Member Address: 350 NW 1st Avenue

Authorized Suite 200

Miami, FL 33128

 Person _____

Other ^{VP} _____ Other _____

Manager Name: Cynthia Bergmann

Member Address: 350 NW 1st Avenue

Authorized Suite 200

Miami, FL 33128

 Person _____

Other ^{VP, S} _____ Other _____

Manager Name: Kolleen O.P. Cobb

Member Address: 700 NW 1st Avenue

Authorized Suite 1620

Miami, FL 33136

 Person _____

Other ^{VP, AS} _____ Other _____

Manager Name: Rusty Godoy

Member Address: 700 NW 1st Avenue

Authorized Suite 1620

Miami, FL 33136

 Person _____

Other ^{VP} _____ Other _____

Manager Name: Christopher C. Yarris

Member Address: 350 NW 1st Avenue

Authorized Suite 200

Miami, FL 33128

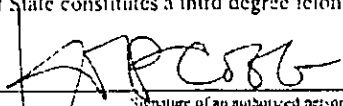
 Person _____

Other ^{VP} _____ 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

Kolleen O.P. Cobb

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 THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "AAF HOLDINGS A LLC", CHANGING ITS NAME FROM "AAF HOLDINGS A LLC" TO "BRIGHTLINE FLORIDA HOLDINGS LLC", FILED IN THIS OFFICE ON THE TWENTY-FIFTH DAY OF JULY, A.D. 2022, AT 1:43 O`CLOCK P.M.




Jeffrey W. Bullock, Secretary of State

5389160 8100
SR# 20223075290

Authentication: 204002377
Date: 07-25-22

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "AAF HOLDINGS A LLC", FILED IN THIS OFFICE ON THE TWENTY-SIXTH DAY OF AUGUST, A.D. 2013, AT 6:08 O'CLOCK P.M.



5389160 8100

131026199

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

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line.

Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 0692597

DATE: 08-27-13