## M22000012359

(Re	questor's Name)	
(Ad	dress)	
	dress)	
(Au	uress,	
(Cit	y/State/Zip/Phone	<del>&gt;</del> #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



700392244677

1022 AUG 16 PM 12: 2 17 DE STATE

SATE STATES

1 - A TATES FECRIOZ TALLAMASSALLA FLORIDA

ELECTOR VIII

AUD 17 CUCK

## FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

08/16/22

NAME: CIP TAMPA 301 LLC

TYPE OF FILING: APPLICATION

COST:

155.00

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

## **COVER LETTER**

TO:

TO:	Registration Section Division of Corporations						
			mpa 301 LLC				
SUBJ	BJECT:Name of Limited Liability Company						
The er Existe	nclosed "Application by Foreign Li ence, and check are submitted to reg	mited Liability Compister the above refer	pany for Authorization enced foreign limited li	to Transact Business in Florida," C jability company to transact busines	Certificate of ss in Florida.		
Please	return all correspondence concerni	ing this matter to the	following:				
	Ania Pfeil						
		N	ame of Person				
	c/o CIP Real Estate						
		Firm/Company					
	19762 MacArthur Blvd	19762 MacArthur Blvd, Suite 300					
		Address					
	Irvine, CA 92612	Irvine, CA 92612					
	City/State and Zip Code						
	ania@ciprealestate.com						
	E-ma	il address: (to be use	d for future annual repo	ort notification)			
For fu	arther information concerning this n	natter, please call:					
	Ania Pfeil		949 at () _	474-7030			
	Name of Conta	act 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 folion Please make check payable to: □ \$125.00 Filing Fee □ \$		[X \$155.00 Filing				

## 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:

L. CIP Tampa 301 LLC		· · · · · · · · · · · · · · · · · · ·	anero v. arrono		
(Name of Foreign	Limited Liability Company, must include "Limited	I Liability Company,	LLC., or LLC.)		
(If name unavailable, enter alternate of	arne adopted for the purpose of transacting business in FI	orida. The alternate nam	e must include "Limited Liabili	ty Company," "L.L.C	," or "LLC."
Delaware					
2. (Jurisdiction under the law of w	nich foreign limited liability company is organized)	J. <u></u>	(FEI number, i	Fapplicable)	
4.					
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ	registration ) inc penalty hability)			
19762 MacArthur Blve	d, Suite 300	19762 N	facArthur Blvd, Suite		
(Street Address of Principal Office)		(Mai	ing Address)		
Irvine, CA 92612		Irvine, C	A 92612		
				<b>5</b>	2
7 Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptable	e)	<u>.</u>	122 AUG
7. Ivame and succi addict	s of Florida registered agent. (1.0. bo.	. <u>1101 (</u> 0000)	-,	· .	913
Name:	Universal Registered Agents, Inc.	11+PP			
Office Address:	1317 California Street			.FOKII	PH 12: 2
	Tallahassee		32304 Florida	9F.	_
	(City)	<u> </u>	(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.

Sharon Gray
(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:  ☐ Manager  ☐ Member  ☐ Authorized  Person  ☐ Other	Name and Address:  CIP Real Estate LLC  Address:  19762 MacArthur Blvd # 300  Irvine, CA 92612  Other	Title or Capacity:  ☐ Manager  ☐ Member  ☐ Authorized  Person  ☐ Other	Name: Robert Y. Strom  Address: 19762 MacArthur Blvd #300  Irvine, CA 92612
□Manager □Member □Authorized	Name:	□Manager □Member □Authorized	Name:Address:
Person		Person	Other
☐Manager ☐Member ☐Authorized Person ☐Other	Name:	☐Manager ☐Member ☐Authorized Person ☐Other	Name:Address:

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

Robert Y. Strom

Typed or pointed name of signee

<u>Delaware</u>

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "CIP TAMPA 301 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 SIXTEENTH DAY OF AUGUST, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CIP TAMPA 301 LLC" WAS FORMED ON THE TWELFTH DAY OF AUGUST, A.D. 2022.

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



Jeffrey W. Budieck, Secretary of State

Authentication: 204170612