# MD9000000 3370

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B. KOHR

AUG 2 7 2009

**EXAMINER** 

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SCORETARY OF STATE
TALLAHASSEE, FLORIDA



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REFERENCE : 107744

7175508

AUTHORIZATION :

COST LIMIT

ORDER DATE: August 26, 2009

ORDER TIME : 9:59 AM

ORDER NO. : 107744-060

CUSTOMER NO: 7175508

#### FOREIGN FILINGS

NAME: CONTINENTAL VILLAGE HOMES, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX \_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret -- EXT# 2949

EXAMINER:

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

IN COMPLIANCE WITH SECTION 6/8.5/B, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN

CONTINENTAL VILLAGE HOMES, 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 and attach a copy of the written
If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written
If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written
consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
DELAWARE 3.
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
5. PERPETUAL
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
UPON QUALIFICATION
(See sections 608.501 & 608.502 F.S. to determine penalty liability)  8833 GROSS POINT ROAD, SUITE 310  SKOKIE, IL 60077  (Street Address of Principal Office)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)  7. 8833 GROSS POINT ROAD, SUITE 310
SKOKIE, IL 60077
(Street Address of Principal Office)
3. If limited liability company is a manager-managed company, check here
). The name and usual business addresses of the managing members or managers are as follows:
CV MANAGER, LLC, Manager
8833 GROSS POINT ROAD, SUITE 310
SKOKIE, IL 60077
10. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a ranslation of the certificate under oath of the translator must be submitted.)  To engage in any and all lawful
11. Nature of business or purposes to be constituted or promoted in Florida: businesses for which, limited
hiability companies may be organized under the Delaware Limited Fability Company Act and qualified under the Florida Limited Liability Company Act, and make any and all lowful investments and undertake such other activities claied or incidental thereto is the Manager may determine are in the interests of the Company.
CV MANAGER; LLC, MANAGER
Signature of a member or an authorized representative of a member. (In accordance with section 608.408 of F.S., the execution of this document constitutes an affirmation under the penalties of ferjury that the facts stated herein are true.)  By: Joseph I. Wolf, Pusident
Typed or put ted name of signee
1 7 pod or planted finding of signed

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	ENTAL VILLAGE HON		······································		
If name una	available, the alternate name	to be used in the state of Florida is:			
2. The nan	ne and the Florida street addre	ess of the registered agent and office are:			
	Corporation Service Company				
	the transfer of the second decimal and the se	(Name)	-		
	1201 Hays Street				
	Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	Tallahassee	FL 32301			
		City/State/Zip	-		
liability con agent and a relating to t	ipany at the place designated gree to act in this capacity. I j he proper and complete perfor	nd to accept service of process for the above st in this certificate, I hereby accept the appointn further agree to comply with the provisions of a rmance of my duties, and I am familiar with an gent as provided for in Chapter 608, Florida St	nent as registered all statutes ed accept the		

Corporation Service Company

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Aimberty B. Moret as its agent

# Delaware

PAGE 1

## The First State

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

DELAWARE, DO HEREBY CERTIFY "CONTINENTAL VILLAGE HOMES, 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-SIXTH DAY OF AUGUST, A.D.

2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CONTINENTAL VILLAGE HOMES, LLC" WAS FORMED ON THE TWENTIETH DAY OF MAY, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

4689909 8300

090809069

AUTHENTY CATION: 7495583

DATE: 08-26-09

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