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BLUEBIRD WAG PALM BAY LLC

TYPE OF FILING: APPLICATION

COST: 125.00

RETURN: PLAIN COPY PLEASE

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AUTHORIZATION: ABBIE/PAUL HODGE

abbattale

CR2E027 (9/10)

COVER LETTER

TO:

Registration Section Division of Corporations

SHRIECT.

Bluebird WAG Palm Bay 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:

Leana Guzman

Name of Person

REGISTERED AGENT SOLUTIONS, INC.

Firm/Company

1701 Directors Blvd., Suite 300

Address

Austin, TX 78744

City/State and Zip Code

CLIENTSERVICES@RASI.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LEANA GUZMAN

- 888

705-7274

Name of Person

Area Code & Daytime Telephone Number

MAILING ADDRESS:

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

STREET ADDRESS:

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

■ \$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

	' COMPLIANCE WITH SECTION 608.303, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTI MITED LIABILITY COMPANY TO TRANSACT BUSINESS' IN THE STATE OF FLORIDA:	K A P	UKEIGIV
1.	BLUEBIRD WAG PALM BAY LLC		_
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC."	')	
ÇOI	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy nsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Impany," "L.L.C," "LLC.")	of the	– written ity
2.	DELAWARE 3		
((Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		
4.	02/12/2013 5. Perpetual		_
	(Date of Organization) (Duration: Year limited liability company will consist or "perpetual")	ase to	
6.	Upon Approval		_
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		
7.	1530 Cornerstone Blvd, Suite 100		
	Daytona Beach, FL 32117	ದ	SIAID BS
	(Street Address of Principal Office)	MAR	- <u>Sort</u>
8.	If limited liability company is a manager-managed company, check here	#	SEASON OF THE SE
9.	The name and usual business addresses of the managing members or managers are as follows:	EH IO:	ALS ASI
	BLUEBIRDIY HOLDINGS LLC	<u>_</u>	
	1530 Cornerstone Blud, Suite 100		- -
	Dougtong Beach FL 32117		
the tran	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having cust injurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language instation of the certificate under eath of the translator must be submitted.) Nature of business or purposes to be conducted or promoted in Florida: REAL ESTATE	guage, a	
			·
) u		
	Signature of a member or an authorized representative of a member.		
	(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in document to the Department of State constitutes a third degree felony as provided for in s.817.155, F	a	

Typed or printed name of signee

James Lloyd, Authorized Person

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.

1. The name of the Limited Liability Company is: BLUEBIRD WAG PALM BAY LLC				
If unavailable, the alternate to be used in the state of Florida is:				

2. The name and the Florida street address of the registered agent and office are:

Registered Agent Solutions, Inc.				
	(Name)			
155 Office Plaza				
Florida Street Address (P.O. Box NOT ACCEPTABLE)				
Tallahassee	_{FL} 32301			

City/State/Zip

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Art Flores, Asst. Secretary-

(Signature)

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional) SECKE TARY OF STATE
DIVISION OF CORPORATIONS

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "BLUEBIRD WAG PALM BAY 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-SEVENTH DAY OF FEBRUARY, A.D.

2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BLUEBIRD WAG PALM BAY LLC" WAS FORMED ON THE TWELFTH DAY OF FEBRUARY, A.D. 2013.

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

5288006 8300

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AUTHENTY CATION: 0246426

DATE: 02-27-13

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