M1400 0004509

· · · · · · · · · · · · · · · · · · ·
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600261380696

06/25/14--01031--013 **125.00





Offices Indianapolis Washington DC San Francisco Denver Minneapolis

800 E. 96th Street Suite 175 Indianapolis, IN 46240 tel: 317.843.5959 fax:317.843.5957

June 24, 2014

VIA FEDEX

Florida Department of State Division of Corporations Registration Section 2661 Executive Center Circle Tallahassee, FL 32301

Re: Sc

Scannell Properties #189, LLC

Application By Foreign Limited Liability Company for Authorization to Transact

Business in Florida

Dear Sir or Madam:

Enclosed please find for filing the original of the Cover Letter and Application By Foreign Limited Liability Company for Authorization to Transact Business in Florida for the above referenced entity. In addition, I am enclosing a check in the sum of \$125.00 in payment of the filing fee.

At your earliest convenience, please file this Application with your office and send to me a certificate of authority or other evidence of this filing. Enclosed for your convenience is a self-addressed, stamped envelope.

Please call should you have any questions at (317) 218-1661 or at debbiec@scannellproperties.com.

Sincerely,

Deborah H. Crabtree,

Paralegal

dhc:enclosures

COVER LETTER

	stration Section sion of Corporations	
SUBJECT: S	Scannell Properties #189, LI	_C
		me of Limited Liability Company
		bility Company for Authorization to Transact Business in Florida," Certificate of bove referenced foreign limited liability company to transact business in Florida
Please return a	all correspondence concerning this ma	atter to the following:
	Debbie Crabtree	
		Name of Person
	Scannell Properties	
		Firm/Company
	800 East 96th Street, Suit	te 175
		Address
	Indianapolis, IN 46240	
		City/State and Zip Code
	beckin@scannellpropertie	es.com
	E-mail address: (to be used for future annual report notification)
For further infe	ormation concerning this matter, plea	ise call:
Debbie Crabtree		_{at (} 317 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Name of Person	Area Code Daytime Telephone Number
Divis Regis P.O. 1	LING ADDRESS: ion of Corporations stration Section Box 6327 hassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
	a check for the following amou 25.00 Filing Fee \$130.00 Filin Certificate of	ig Fee & □\$155.00 Filing Fee & □\$160.00 Filing Fee, Certificate

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. Scannell Properties #189, LL (Name of Foreign Limited Liability)	.C		L.C.," or "LI	LC.")	
(If name unavailable, enter alternate name consent of the managers or managing mer Company," "L.L.C," "LLC.")					
_{2.} Indiana		115934			
(Jurisdiction under the law of which for company is organized)	reign limited liability	(FEI number, if app	licable)	·	
4	······································				
(Date first tra (See sections 6	ansacted business in Florida, if properties of the properties of t	rior to registration.) termine penalty liability)			
800 East 96th Street, Suite	175		V s agency		
5. <u>ees Last sett ettet, satte</u>				-1"-	
Indianapolis, IN 46240			5		* *.
	(Street Address of Princip	oal Office)	15:11	· 🕠	The second
6, 800 East 96th Street, Suite 1	75		::	C)	ì
o			1.1.s	**************************************	- 1
Indianapolis, IN 46240			ДЗ 500 г.		***************************************
	(Mailing Address	s)		ro	
7. The name, title or capacity and	address of the person(s) wh	ho has/have authority to	***	s/are:	;
Robert J. Scannell, Manager 8	00 East 96th Street, Suite	e 175, Indianapolis, I	N 46240		
Douglas L. Snyder, Manager 8	00 East 96th Street, Suit	e 175, Indianapolis, I	N 46240		
James C. Carlino, Manager 80	0 East 96th Street, Suite	175, Indianapolis, IN	146240		
8. Attached is an original certificate of exis in the jurisdiction under the law of which it translation of the certificate under oath of th	t is organized. (A photocopy is no				
	Signature of an author				
	Signature of an author	ized person			
	605.0203, F.S., the execution of this				
	efacts stated herein are true. I am av)

Typed or printed name of signee

James C. Carlino

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I, Connie Lawson, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

SCANNELL PROPERTIES #189, LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on June 24, 2014, and was in existence or authorized to transact business in the State of Indiana on June 24, 2014.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Twenty-Fourth Day of June, 2014.

Corrie Lawson

Connie Lawson, Secretary of State

20140624001997/2014062435859

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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	y is:		
Scannell Prop	erties #189, LLC			
If unavailable, t	he afternate to be used in the st	ate of Florida i	s:	
2. The name an	d the Florida street address of t	the registered a	gent and office are:	
	National Corpo	erate Research (Name)	, Ltd., Inc.	
	155 Of Florida Street Addres	fice Plaza Driv s (P.O. Box NOT		
	Tallahassee	FL City/State/Zip	32301	
liability company registered agent statutes relating	ned as registered agent and to a y at the place designated in this and agree to act in this capacit to the proper and complete per ations of my position as register	certificate, I he y. I further agr formance of my	ereby accept the appo ree to comply with the duties, and I am fam	intment as provisions of all iligr with and
‡	fron Tolors As	met air	1 Secretar	y
		Filing Fee for A Designation of	Application Registered Agent	CRIDA

\$ 30.00

\$ 5.00

Certified Copy (optional)

Certificate of Status (optional)