

MI7000006336

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

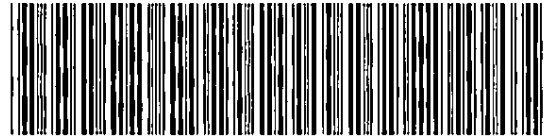
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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FILED
17 JUL 26 AM 11:49
TALLAHASSEE, FLORIDA
CLERK OF SUPERIOR COURT

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2017 JUL 26 PM 1:49
TALLAHASSEE, FLORIDA
CLERK OF SUPERIOR COURT

JUL 27 2017

YES CR

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 740815 7864759
AUTHORIZATION 
COST LIMIT : \$,125.00

ORDER DATE : July 25, 2017
ORDER TIME : 9:34 AM
ORDER NO. : 740815-010
CUSTOMER NO: 7864759

FOREIGN FILINGS

NAME: 2016 PORTFOLIO MASTER LEASE,
LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 2016 Portfolio Master Lease, 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:

Joan E. Thurmond

Name of Person

2016 Portfolio Master Lease, LLC

Firm/Company

3570 Keith Street, NW

Address

Cleveland, TN 37312

City/State and Zip Code

Joan_Thurmond@lcca.com

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

For further information concerning this matter, please call:

Joan E. THurmond

Name of Contact Person

at 423

Area Code

473-5868

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

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. 2016 Portfolio Master Lease, 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. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")

2. Tennessee 3. 81-3218291
(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)

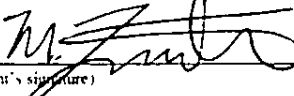
5. 3570 Keith Street, NW 6. 3570 Keith Street, NW
(Street Address of Principal Office) (Mailing Address)
Cleveland, TN 37312 Cleveland, TN 37312

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
 Name: Corporation Service Company
 Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (Zip code)

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 TALLAHASSEE, FLORIDA
 SECRETARY OF STATE

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.

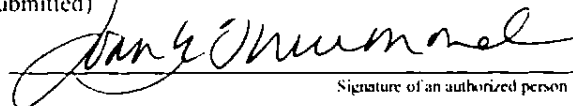
By:  Melissa Zender
(Registered agent's signature) Asst. Vice President

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

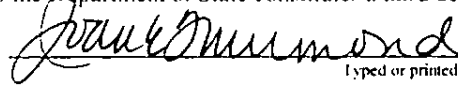
<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
Corporate Manager	Developers Investment Company II, Inc 3570 Keith Street, NW Cleveland, TN 37312	_____	_____
_____	_____	_____	_____

(Use attachments if necessary)

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)


Signature of an authorized person

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.


Typed or printed name of signer
 Joan E. Thurmond, Assistant Secretary of Developers Investment Company II, Inc.,



Tre Hargett
Secretary of State

Division of Business Services
Department of State
State of Tennessee
312 Rosa L. Parks AVE. 6th FL
Nashville, TN 37243-1102

JOAN THURMOND
JOAN THURMOND
3570 KEITH STREET, NW
CLEVELAND, TN 37312

June 27, 2017

Request Type: Certificate of Existence/Authorization
Request #: 0242705

Issuance Date: 06/27/2017
Copies Requested: 1

Document Receipt

Receipt #: 003452000 Filing Fee: \$20.00
Payment-Credit Card - State Payment Center - CC #: 3705530439 \$20.00

Regarding: 2016 Portfolio Master Lease, LLC
Filing Type: Limited Liability Company - Domestic Control #: 856722
Formation/Qualification Date: 07/11/2016 Date Formed: 07/11/2016
Status: Active Formation Locale: TENNESSEE
Duration Term: Perpetual Inactive Date:
Business County: BRADLEY COUNTY

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

2016 Portfolio Master Lease, LLC

- * is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- * has filed the most recent annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett
Secretary of State

Processed By: Cert Web User

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