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	(Requestor's Name)	
	(Address)	
	,	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	(Duningan Enthy Nama)	
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of St	atus
Special Instructions to	Filing Officer:	
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Office Use Only



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March 9, 2022

CSC

SUBJECT: RESERVE AT COCONUT POINT, LLC

Ref. Number: W22000030920

Please give original submission date as file date.

We have received your document for RESERVE AT COCONUT POINT, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Missing title for Tony Organ.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sharon D Franklin Regulatory Specialist II

Letter Number: 722A00005684



CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 534099 5124005

AUTHORIZATION : Knill Bloma

COST LIMIT : \$/13,0.00

ORDER DATE: March 8, 2022

ORDER TIME : 2:18 PM

ORDER NO. : 534099-005

CUSTOMER NO: 5124005

FOREIGN FILINGS

NAME: RESERVE AT COCONUT POINT, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY

XX PLAIN STAMPED COPY

XX____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	Reserve at Coconut Point, LLC		
0000		ame of Limited Liability Company	
		ity Company for Authorization to Transact Business in Florida," Certificate of ove referenced foreign limited liability company to transact business in Florida.	
Plcase	return all correspondence concerning this matter	er to the following:	
	Debra McDonald		
		Name of Person	
	AIR Communities		
Firm/Company			
	4582 S. Ulster St., Suite 1700		
Address			
	Denver, CO 80237	2	
		City/State and Zip Code	
	debra.mcdonald@aircommunities	City/State and Zip Code	
	E-mail address: (to	be used for future annual report notification)	
For fur	ther information concerning this matter, please	ACCIT	
	Debra McDonald	303 757-8101	
	Name of Contact Person	Area Code Daytime Telephone Number &	
Mailing Address: Registration Section		Street Address: Registration Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
	Enclosed is a check for the following amount Please make check payable to: FLORIDA D \$125.00 Filing Fee \$130.00 Filing Certificat	EPARTMENT OF STATE	

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOILLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Reserve at Coconut Point, 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.") Delaware 88-0919249 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 4582 S. Ulster St. 4582 S. Ulster St. (Street Address of Principal Office) (Mailing Address) Suite 1700 Suite 1700 Denver, CO 80237 Denver, CO 80237 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee (City) 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. Corporation Service Company By:

(Registered agent's sign

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:

Name and Address:

Title or Capacity:

Name and Address:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:	
□Manager	Name: Apartment Income REIT, L.P.	□Manager	Name: Lisa R. Cohn	
■Member	Address: 4582 S. Ulster St.	□Member	Address:	
□Authorized	Suite 1700	■Authorized	Suite 1700	
Person	Denver, CO 80237	Person	Denver, CO 80237	
□ Other	Other	□Other	Other	
□Manager	Paul Beldin Name:	□Manager	Name: Debra A. McDonald	
□Member	Address:	□Member	Address: 4582 S. Ulster St.	
■Authorized	Suite 1700	≅ Authorized	Suite 1700	
Person	Denver, CO 80237	Person	Denver, CO 80237	
Other	Other	Other	(et e e e	
			: 00	
□Manager	Name: Tony Organ	□Manager	Name: Martin Sprang	
□Member	Address: 4582 S. Ulster St.	☐Member	Address: 4582 S. Ulster St. —	
■ Authorized	Suite 1700	■ Authorized	Suite 1700 5	
Person	Denver, CO 80237	Person	Denver, CO 80237	
□Other	Other	Other		

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

Debra A. McDonald



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

DELAWARE, DO HEREBY CERTIFY "RESERVE AT COCONUT POINT, 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 EIGHTH DAY OF MARCH, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RESERVE AT COCONUT POINT, LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF FEBRUARY, A.D. 2022.

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

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Authentication: 202856818

Date: 03-08-22

SR# 20220920088

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