

M 18000003613

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

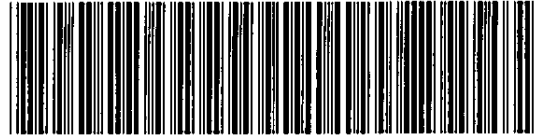
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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18 APR 11 PM 3:56

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 APR 11 AM 6:23

B FIGUEROA

APR 16 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 12, 2018

CT CORP

SUBJECT: MOSAIC AT OAK CREEK DE, LLC
Ref. Number: W18000034351

4.13.18
CORRECTED

*Please keep original file
date. Thank you!*

We have received your document for MOSAIC AT OAK CREEK DE, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return the corrected original and one copy of 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.

Brittany M Figueroa
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 918A00007383

2018 APR 13 AM 10:42
MAIL ROOM

CT Corp.

3458 Lakeshore Drive, Tallahassee, FL 32312
850-656-4724

Date: 4/11/2018 (4-13-18)

Acc#I20160000072



| | |
|-------------|---|
| Name: | Mosaic at Oak Creek Development, LLC (DE) |
| Document #: | |
| Order #: | 10924965 |

| | | |
|-----------------------------------|--------------------------|-------------------------|
| Certified Copy of Arts & Amend: | <input type="checkbox"/> | |
| Plain Copy: | <input type="checkbox"/> | |
| Certificate of Good Standing: | <input type="checkbox"/> | |
| | <input type="checkbox"/> | |
| Apostille/Notarial Certification: | <input type="checkbox"/> | Country of Destination: |
| | | Number of Certs: |

| | |
|---------|------------|
| Filing: | Certified: |
| | Plain: |
| | COGS: |

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| Availability _____ |
| Document _____ |
| Examiner _____ |
| Updater _____ |
| Verifier _____ |
| W.P. Verifier _____ |
| Ref# _____ |

Amount: \$ 160.00

Thank you!

**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. Mosaic at Oak Creek Development, 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. Delaware 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable)

4. April 10, 2018
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 3414 Forum Blvd. Ste. 3 6. 3414 Forum Blvd. Ste. 3
(Street Address of Principal Office) (Mailing Address)
Fort Myers, Florida 33905 Fort Myers, Florida 33905

7. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: Leigh K. Fletcher, Esq.
 Office Address: 433 Central Avenue Ste. 400
St. Petersburg, Florida 33701
(City) (Zip code)

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.

Leigh K. Fletcher
(Registered agent's signature)

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> |
|---------------------------|------------------------------------|---------------------------|--------------------------|
| <u>Managing Member</u> | <u>Mosaic at Oak Creek DB, LLC</u> | _____ | _____ |
| | <u>3414 Forum Blvd. Ste. 3</u> | _____ | _____ |
| | <u>Fort Myers, Florida 33905</u> | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

(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)

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.

Roxanne Amoroso
Signature of an authorized person

Roxanne Amoroso
Typed or printed name of signer

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 19 APR 11 AM 6:22

Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MOAIC AT OAK CREEK DEVELOPMENT, 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 THIRD DAY OF APRIL, A.D. 2018.

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



6826666 8300

SR# 20182389849

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202440770

Date: 04-03-18