

Fax Server 2/21/2017 8:38:13 AM PAGE 2/005 Fax Server
B17000000047
Division of Corporations Page 1 of 2

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H17000048845 3)))



H170000488453ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : GREENSPOON MARDER, P.A.
Account Number : 076064003722
Phone : (888) 491-1120
Fax Number : (954) 343-6962

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: jmiller@elrhinvestments.com

FLORIDA/FOREIGN LP/LLLP
Landings at Lake Gray LP

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$1,061.25

Electronic Filing Menu

Corporate Filing Menu

Help

H17000048845

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANSACT BUSINESS IN FLORIDA

1. Landings at Lake Gray LP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)

Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.

Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.P. or LLLP.

If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.

2. Delaware

State or Country of Formation

3. 10-18-2016

Date of Formation

4. Federal Employer Identification Number: 81-4171112

5. Name of Registered Agent for Service of Process and Florida Street Address:

Kilsti King, Robbins Property Associates

4890 W. Kennedy Blvd., Suite 240

Tampa, FL 33609

6. 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.

Signature of Registered Agent

7. Principal Office:

c/o American Landmark II LLC
11911 US Highway 1, Suite 204
North Palm Beach, FL 33408

8. Mailing Address:

c/o American Landmark II LLC
11911 US Highway 1, Suite 204
North Palm Beach, FL 33408

9. If limited partnership is a limited liability limited partnership, check box.

10. Name, principal office address, and mailing address of each general partner:

Name of General Partner: EMIF Lake Gray Management LLC

Street Address: 11911 US Highway 1, Suite 204
North Palm Beach, FL 33408Mailing Address: 11911 US Highway 1, Suite 204
North Palm Beach, FL 33408

Name of General Partner:

Street Address:

Mailing Address:

Name of General Partner:

Street Address:

Mailing Address:

Name of General Partner:

Street Address:

Mailing Address:

H17000048845

H17000048845

Page 1 of 2

Name of General Partner _____ Name of General Partner _____

Street Address _____ Street Address _____

Mailing Address _____ Mailing Address _____

11. Effective date, if other than the date of filing:

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

12. Attached is a certificate of existence duly authenticated not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the laws of which it is organized.

Signed this 17th day of February, 2017_____
Signature of a general partner

The individual signing this document affirms that the facts stated herein are true and the individual is aware that 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.

Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

Page 2 of 2

FILED
2017 FEB 21 AM 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H17000048845

Delaware

The First State

H17000048845

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LANDINGS AT LAKE GRAY LP" 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 FEBRUARY, A.D. 2017.

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

FILED
2017 FEB 21 AM 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



6186154 8300

SR# 20170739667

You may verify this certificate online at corp.delaware.gov/authver.shtmlA handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202004837

Date: 02-08-17

H17000048845