

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.

(((H12000112073 3)))



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)617-6381

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5368

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

Oma 11	Address:			

FOREIGN PROFIT/NONPROFIT CORPORATION Harper Lake Company VIII

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

T. Har AFR 26.201

https://efile.sunbiz.org/scripts/efilcovr.exe

Z609889998

4/25/2012 04/52/5015 10:03

NOITAROARON TO

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

<i>ነኳን ርግር ነ ፈ</i> ወቻ ቻ <i>ል አነርግ</i>		*FARIFFER THE WAY FAITHER YOU	33≤ 33≤ 33≤ 33≤ 33≤ 33≤ 33≤ 33≤ 33≤ 33≤	72
		TATUTES, THE FOLLOWING IS SUBMITT BUSINESS IN THE STATE OF FLORIDA.		APR
n Harper Lake Co	manage VIII		EST AN	25
(Enter name of c	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,"	PA OF STA	PH I
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business i	n Florida)	35
2. California	3	95-4347688	•	
	under the law of which it is incorporated)	(FEI number, if applicable)		
4, 10/29/1991	5	perpoinal		
(Dute	of incorporation)	(Duration: Year corp. will cease to exist or "pe	rpctual")	
6				
		in Florida, if prior to registration) 502, F.S., to determine penalty liability)		
7. 700 Universe Bl	vd., Iuno Beach, Florida 33408			
· ·	(Principal office ad-	iress)		
700 Universe Bis	d., Amo Beach, Florida 33408			
	(Current mailing ad	dreas)		
ν	pertuar of California limited partnership authorized in home state or c			
9. Name and sire	et address of Florida registered agent: (P.	O. Box <u>NOT</u> acceptable)		
Namo;	J.R. Leon			
Office Address:	4200 West Fingler Street			
	Miami	, Florida 33134		
	(City)	(Zip code)		
Having been nam designated in this further agree to c	'application, I hereby accept the appoint	ice of process for the above stated corporations of process for the above stated corporations and agree to act in relative to the proper and complete performation as registered agent.	this canaci	in T
11. Attached is a the Department of	certificate of existence duly authentionted. State, by the Scoretary of State or other or	not more than 90 days prior to delivery of the	da applicati	ion to

04/52/5015 10:03 2609889998

AIR - MASSAILICT SAME ALL

under the law of which it is incorporated.

Chairman: ___ Address:

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Vice Chairman:	E
Address:	E R
	5 F
TJ Tusoai	THE STATE OF THE S
Director:	35 :-
Address:	<u> </u>
Juno Beach, Florida 33408	
Director: Mark R. Sorensen	
Address: 700 Universe Bivd.	
Juno Beach, Florida 33408	
B. OFFICERS	
President: TJ Tuscai	
Address: 700 Universe Blvd.	
Juno Beach, Florida 33408	
Vice President: Michael O'Sullivan	
Address: 700 Universe Bivd.	
Juno Beach, Florida 33408	
Secretary: Charles S. Schultz	
Address: 700 Universe Blvd., June Beach, Florida 33408	
Treasurer: Mark R. Sorensen	
Address: 700 Universe Blvd., Juno Beach, Florida 33408	
NOTE: If ngcessary, you may attach an addendum to the application listing additional officers and/o	or directors.
13. Chala Activity	·• ·• ·• ·• ·• ·• ·• ·• ·• ·• ·• ·• ·• ·
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the are true and that he or she is aware that false information submitted in a document to the Department third degree felony as provided for in s.817.155, F.S.	facts stated herein of State constitutes a
14 Michigan Ocho Itz appropriati	

(Typed or printed name and capacity of person signing application)

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

HARPER LAKE COMPANY VIII

FILE NUMBER:

FORMATION DATE:

C1803877 10/29/1991

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of April 23, 2012.

DEBRA BOWEN

Secretary of State

NP-25 (REV 1/2007)

RYM

2609889998 80:01 ZT0Z/SZ/\$0