## L19000150169

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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SECRITARY OF STATE

JUN 17 2019

K. Brumbley

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

Pnone: 850-558-1500				
ACCOUNT NO. : I2000000195				
REFERENCE : 808480 8121266				
AUTHORIZATION: Topula Reman				
COST LIMIT : \$ 125'.00				
ORDER DATE : June 14, 2019				
ORDER TIME : 10:25 AM				
ORDER NO. : 808480-005				
CUSTOMER NO: 8121266				
DOMESTIC FILING				
NAME: ROCKY CREEK APARTMENTS OWNER, LLC				
EFFECTIVE DATE:				
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING				
CONTACT PERSON: Roxanne Turner - EXT.				
EXAMINER'S INITIALS:				

## COVER LETTER

	ew Filing Section vision of Corporations					
SUBJECT	Rocky Creek Apartments O	wner, LLC				
SOBIECT.		of Limited Lia	ability Company			
The enclose	ed Articles of Organization and fe	e(s) are submit	ted for filing.			
Please retur	n all correspondence concerning	this matter to the	he following:			
	Jessica Norman, EVP & Corp	orate Counse	el			
		Namo	of Person			
	Independence Realty Trust					
	Firm/Company					
	1835 Market Street, Suite 2600					
	Address					
	Philadelphia, PA 19103					
:	norman@irtliving.com	City/State	and Zip Code			
<u> </u>	norman@irtliving.com	e used for futu	re annual report notification)			
For further in	formation concerning this matter					
			270 4005			
_	Gayle O'Donnell	215 _at (	270-4895 )			
	Name of Person	Area Code	Daytime Telephone Number			
Enclosed is	a check for the following amount	:				
\$125.00 Fil	ing Fee \$130.00 Filing Fe Certificate of Sta	tus L—Cer	\$160.00 Filing Fee, tified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	Mailing Address		Street Address			
	New Filing Section Division of Corporations		New Filing Section Division of Corporations			
	P.O. Box 6327		Clifton Building			
	Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(171)	isi cumann anc words. Limnen raan	dia Compone "	.L.C.," or "LLC.")	
	in terminal me mende billion	ntty Company, L.	Lic., or LLC. )	
FICLE II - Address mailing address and	: street address of the principal office	of the Limited Lia	ability Company is:	
<u>j</u>	Principal Office Address:		Mailing Address:	
1835 Market Street, Suite 2600		1835 M	Market Street, Suite 2600	
	Philadelphia, PA 19103		Philadelphia, PA 19103	
Philadelphia FICLE III - Register Limited Liability Coher business entity v		egistered Agent's istered Agent. You	Signature:	
Philadelphia  FICLE III - Register  Limited Liability Co  ther business entity v	, PA 19103  red Agent, Registered Office, & Rompany cannot serve as its own Register an active Florida registration.)  a street address of the registered age	egistered Agent's istered Agent. You nt are:	Signature:	
Philadelphia  FICLE III - Register  Limited Liability Co  ther business entity v	, PA 19103  red Agent, Registered Office, & Rompany cannot serve as its own Registration.)	egistered Agent's istered Agent. You nt are: ompany	Signature:	
Philadelphia  FICLE III - Register  Limited Liability Co  ther business entity v	, PA 19103  red Agent, Registered Office, & Representation of the registered age  a street address of the registered age  Corporation Service Co	egistered Agent's istered Agent. You nt are: ompany	Signature:	
Philadelphia  FICLE III - Register  Limited Liability Co  ther business entity v	, PA 19103  red Agent, Registered Office, & Representation of Registered age as its own Registration.)  a street address of the registered age Corporation Service Constitution National Registered Re	egistered Agent's istered Agent. You nt are: ompany me	Signature: I must designate an individual or	
Philadelphia  FICLE III - Register  Limited Liability Co  ther business entity v	, PA 19103  red Agent, Registered Office, & Representation of the registered age  Corporation Service Contact National Street Agent Nation Nat	egistered Agent's istered Agent. You nt are: ompany me	Signature: I must designate an individual or	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

PALLAHASSEE, FLORES

Roxanne Turner
Asst. Vice President

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Independence Realty Operating Partnership, LP 1835 Market Street, Suite 2600 Philadelphia, PA 19103
(Use attachment if necessary)	
f an effective date is listed, the date must be sp te date of filing.)	c of filing:  . (OPTIONAL)  secific and cannot be more than five business days prior to or 90 days after  meet the applicable statutory filing requirements, this date will not be listed as  of State's records.
RTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE;	
This document is executed any fals	ember or an authorized representative of a member.  Ited in accordance with section 605.0203 (1) (b), Florida Statutes.  The information submitted in a document to the Department of State  The felony as provided for in s.817.155, F.S.
Gayle O'Donne	II, Paralegal and Authorized Person Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)