## 183 N. MERIDA, STRIET, DW LEV 000052.5 TALLAHASSEE, FL 3201 0 000052.5

FILING COVER SHEE ACCT. #FCA-14 _	T	
ACC1. #FCA-14	89-00-644-00671	W-19186
CONTACT:	CINDY HICKS	<i>V</i>
DATE:	8-2-00	-08/02/0001033013 -****155.00 ****155.00
REF. #:	0173.12624	
CORP. NAME:	LAKE WORTH AP	ARTMENTS, LLC
( ) ARTICLES OF INCORPORA ( ) ANNUAL REPORT ( ) FOREIGN QUALIFICATION ( ) REINSTATEMENT ( ) CERTIFICATE OF CANCEL ( ) OTHER:	( ) TRADEMARK/SERVICE MARK ( ) LIMITED PARTNERSHIP ( ) MERGER	( ) ARTICLES OF DISSOLUTION ( ) FICTITIOUS NAMES OF CORPORATIONS ( ) LIMITED LIABILITY ( ) WITHDRAWAL ( ) UCC-3
STATE FEES PREPA	ID WITH CHECK# 19974	_ FOR \$_155.00
AUTHORIZATION F	OR ACCOUNT IF TO BE DEBIT	ED:
·	COST L	IMIT: \$ TANK OF THE CO.
PLEASE RETURN:		99 7 <u>H</u>
(X) CERTIFIED COPY  ( ) CERTIFICATE OF STATE	( ) CERTIFICATE OF GOOD STANDING	( ) PLAIN STAMPED COPY
Examiner's Initials		•



#### FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

August 2, 2000

CCRS CINDY HICKS PLEASE GIVE ORIGINAL SUBMISSION DATE AS FILE DATE.

SUBJECT: LAKE WORTH APARTMENTS, LLC

Ref. Number: W00000019186

We have received your document for LAKE WORTH APARTMENTS, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

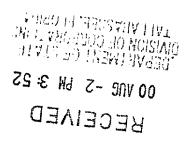
The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

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) 487-6967.

Michelle Hodges Document Specialist

Letter Number: 500A00041935



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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Lake Worth Apartments LLC (Name of foreign)	lim	ited liability company)		
,				
Delaware	3.	33-0738940		<del></del>
Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)		
January 17, 1997	5.	Perpetual		
(Date of Organization)		(Duration: Year limited liability company will c exist or "perpetual")	ease t	io
Upon Qualification (Date first transacted business in Florida. (Sec	e se	ections 608.501, 608.502, and 817.155, F.S.)		
700 Newport Center Drive		*		
Newport Beach, California 92660				
(Street address	oi	principal office)	00	SEVIO
If limited liability company is a manager-managed	l co	ompany, check here 💌	- 90V 00	ECRETA SION OF
The name and usual business addresses of the mar	ag	ging members or managers are as follows:	2 AM	RYOF
Pacific Life Insurance Company		<del></del>	ಝ	
700 Newport Center-Drive			50	SXGL
Newport Beach, California 92660		-		
Nonpolio Bossell, Carlon Barriero		Gentle Control of the		
<ol> <li>Attached is an original certificate of existence, no more than 9 e jurisdiction under the law of which it is organized. (A photoco anslation of the certificate under oath of the translator must be sul</li> </ol>	рy	is not acceptable. If the certificate is in a foreign lang	tody o	of record , a
1. Nature of business or purposes to be conducted of	or j	promoted in Florida: Property Owner	***	
Signature of a member or an a (In accordance with section 608.408(3), an affirmation under the penalties of pe	utl	orized representative of a member.  In the execution of this document constitutes by that the facts stated herein are true.)	-	<u> </u>
Dale E. Hawley				
	-A	name of signee		

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name of the Limited Liability Company is:							
	Lake Worth Apartments LLC							
2.	2. The name and the Florida street address of the registered agent and office are:							
	NRAI Services, Inc. (Name)							
	526 East Park Avenue							
Florida street address (P.O. Box NOT ACCEPTABLE)								
	Tallahassee FL 32301							
	City/State/Zip							

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

(Signature)

C. Baclet, Vice President

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

#### PAGE 1

# State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LAKE WORTH APARTMENTS 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 FIRST DAY OF AUGUST, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LAKE WORTH APARTMENTS LLC" WAS FORMED ON THE SEVENTEENTH DAY OF JANUARY,

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

6

dward J. Freel, Secretary of State

AUTHENTICATION:

08-01-00

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