

M03000002937

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

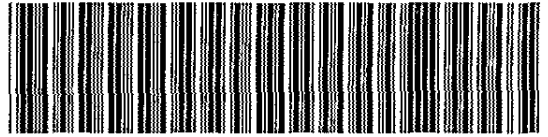
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 229421 3500240

AUTHORIZATION :

COST LIMIT : \$ 125.00

FILED
03 SEP -4 AM 8:56
TALLAHASSEE, FLORIDA

ORDER DATE : September 4, 2003

ORDER TIME : 2:34 PM

ORDER NO. : 229421-045

CUSTOMER NO: 3500240

CUSTOMER: Siobhan Smith, Legal Asst
Steptoe & Johnson LLP
1330 Connecticut Avenue, N.W.

Washington, DC 20036

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TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: ALPINE-ORLANDO, L.L.C.

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd -- EXT# 1140

EXAMINER: _____

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

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

1. Alpine - Orlando, L.L.C.
(Name of foreign limited liability company)
2. Delaware 3. 33-0684863
(Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable)
4. (see attached)* 5. perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. UPON FILING
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 359 S. Swing Road
Greensboro, NC 27409
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☐

9. The name and usual business addresses of the managing members or managers are as follows:

Alpine Assets, Inc., 359 S. Swing Road, Greensboro, NC 27409

Bigwood Atlantic, LLC, 359 S. Swing Road, Greensboro, NC 27409

10. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: to engage in any lawful
business for which an LLC may be formed under the Florida Limited Liability Company Act.


Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

David Donnalley, authorized representative of a Member

Typed or printed name of signee

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

FILED
03 SEP -4 AM 9:58
STATE OF FLORIDA
TALLAHASSEE

*ALPINE - ORLANDO, L.P., LTD., a Delaware limited partnership formed on May 1, 1998, was converted into ALPINE - ORLANDO, L.L.C., a Delaware limited liability company on February 5, 2003.

**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 ON THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Alpine-Orlando, L.L.C.

2. The name and the Florida street address of the registered agent and office are:

Corporation Service Company

(Name)

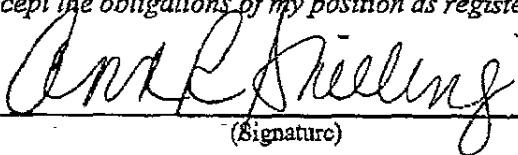
1201 Hays Street

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Tallahassee, FL 32301 (Leon County)

(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)

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

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TALLAHASSEE, FLORIDA

Delaware

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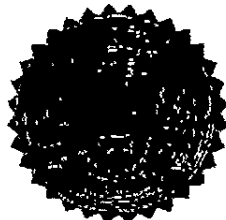
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ALPINE-ORLANDO, L.L.C." 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 FOURTH DAY OF SEPTEMBER, A.D. 2003.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ALPINE-ORLANDO, L.L.C." WAS FORMED ON THE THIRTEENTH DAY OF MAY, A.D. 1996.

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03 SEP 11 AM 9:56
STATE OF DELAWARE
HARRISBURG



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 2615465

DATE: 09-04-03