

M040000000849

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

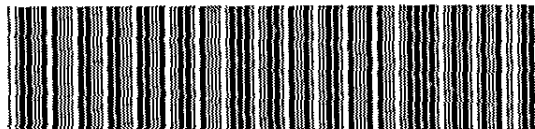
(Document Number)

Certified Copies _____

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04 MAR -2 PM 3:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

04 MAR -2 PM 2:09

DEPARTMENT OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

BK

DEPARTMENT OF STATE
ACCOUNT FILING COVER SHEET

Account Number FCA000000017
Reference:
(Sub Account) _____
Date: 3/2/04
Requestor Name: Carlton Fields
Address: Post Office Drawer 190
Tallahassee, Florida 32302
Telephone: (850) 224-1585
Contact Name: Kim Pullen, CLA (x261)

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04 MAR -2 PM 3:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Corporation Name: The Reserve at Naples
Phase 2, LLC
Entity Number: _____
Authorization: Kim Pullen

<input checked="" type="checkbox"/> Certified Copy	<input checked="" type="checkbox"/> Certificate of Status
<input checked="" type="checkbox"/> New Filings	_____ Plain Stamped Copy
_____ Fictitious Name	_____ Annual Report
	_____ Amendments
	_____ Registration

(X) Call When Ready	(X) Call if Problem	() After 4:30
(X) Walk In	() Will Wait	(X) Pick Up

CF Internal Use Only

Client: 47470 Matter: 17154
Name: Vinnie Vaughan Office: TPA

**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. The Reserve at Naples Phase 2, LLC
(Name of foreign limited liability company)
2. Alabama
(Jurisdiction under the law of which foreign limited liability company is organized)
3. Not Applicable
(FEI number, if applicable)
4. January 21, 2004
(Date of Organization)
5. Perpetual
(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. 3800 Corporate Woods Drive, Suite 100, Birmingham, Alabama 35242
(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:

Jack Fiorella III at 3800 Corporate Woods Drive, Suite 100, Birmingham, Alabama 35242

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: The acquisition, development, ownership, and management of real estate.

Jack Fiorella III
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.)

Jack Fiorella III, Manager

JACK FIORELLA III
Typed or printed 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:

The Reserve at Naples Phase 2, LLC

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

CFRA, LLC

(Name)

One Harbour Place, 5th FL, 777 S. Harbour Island Blvd.

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

Tampa

FL

33602-5730

(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.

Registered Agent Services

By: 

(Signature)

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

Nancy L. Worley
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Nancy L. Worley, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporate records on file in this office disclose that The Reserve at Naples Phase 2, LLC organized in the office of the Judge of Probate of Jefferson County on January 21, 2004. I further certify that the records do not disclose that said The Reserve at Naples Phase 2, LLC has been dissolved.



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

February 18, 2004

Date

Nancy L. Worley
Nancy L. Worley

Secretary of State