

M04000002511

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

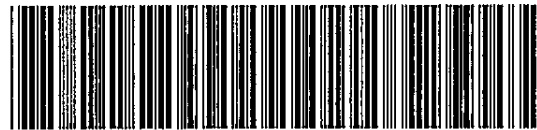
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04 JUN 25 PM 2:40
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04 JUN 25 AM 7:59
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04 JUN 25 AM 7:58
TALLAHASSEE, FLORIDA

FILED



CORPORATION SERVICE COMPANY™

FILED
04 JUN 25 AM 7:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032

REFERENCE : 777393 4367113

AUTHORIZATION :

Patricia Pigato

COST LIMIT : \$ 125.00

ORDER DATE : June 25, 2004

ORDER TIME : 1:15 PM

ORDER NO. : 777393-035

CUSTOMER NO: 4367113

CUSTOMER: Georgina Popham
Nason Yeager Gerson White &
Suite 1200
1645 Palm Beach Lakes Blvd.
West Palm Beach, FL 33401

FOREIGN FILINGS

NAME: FALCON 114 ACRES, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea -- EXT# 2914

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. FALCON 114 ACRES, LLC

(Name of foreign limited liability company)

2. DELAWARE

(Jurisdiction under the law of which foreign limited liability
company is organized)

3. _____

APPLIED FOR

(FEI number, if applicable)

4. JUNE 23, 2004

(Date of Organization)

5. _____

PERPETUAL

(Duration: Year limited liability company will cease to exist or
"perpetual")

6. _____

UPON QUALIFICATION

(Date first transacted business in Florida.) (SEE SECTIONS 608.501, 608.502 and 817.155, F.S.)

7. _____

7602 MARBLEHEAD LANE

PARKLAND, FLORIDA 33067

(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:

Arthur J. Falcone

Edward Falcone

7602 Marblehead Lane

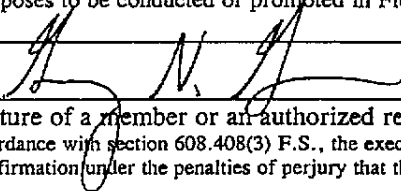
3300 University Drive, Suite 001

Parkland, Florida 33067

Coral Springs, Florida 33065

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: Real Estate Investments


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.)

Gary N. Gerson, Authorized Representative

(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:

FALCON 114 ACRES, LLC

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

Gary N. Gerson
(Name)

1645 Palm Beach Lakes Blvd., Suite 1200
Florida street address (P.O. Box NOT ACCEPTABLE)

West Palm Beach, FL 33401
(City/State/Zip)

Having been named as registered agent 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 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.



Gary N. Gerson, Registered Agent

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

Delaware

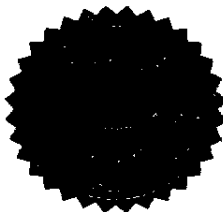
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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FALCON 114 ACRES, 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 TWENTY-FOURTH DAY OF JUNE, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FALCON 114 ACRES, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF JUNE, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

3820220 8300

AUTHENTICATION: 3194503

040467989

DATE: 06-24-04