# MU4000003545

(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



000040153350

04 AUG 30 PH 2:56 SECRETARY OF STATE FALL AHASSEE, FLORID

TH

CH VICE 30 WHILL O

AGIROLT W YNALENDES TALL AHASSEN, FLORIDA

04 AUG 30 AM 2: 56

FILED

#### \* FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

Or Mile 30 by 2:54

PH: (850) 668-4318 FX: (850) 668-3398

DATE:

08-30-04

ACCOUNT NO:

FCA00000015

AUTHORIZATION:

ABBIE/PAUL HODGE

TYPE OF FILING: APPLICATION TO TRANSACT BUSIN

NAME: WAVERLY LAS OLAS, LLC

**SPECIAL INSTRUCTIONS:** 

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

t t en	Y FOR AUTHORIZATION TO DA IS SUBMITTED TO REGISTER A FOREIGNS
	48 TU
APPLICATION BY FOREIGN LIMITED LIABILITY COMPAN	Y FOR AUTHORIZATION TO
TRANSACT BUSINESS IN FLORE	DA TOP A
N COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	IS SUBMITTED TO REGISTER LÉGRETGISS
Waverly Las Olas, LLC	Of the second
(Name of foreign limited liability compan	ý) 
Delaware 3, 20-1531625	
(Jurisdiction under the law of which foreign limited liability (FEI r company is organized)	umber, if applicable)
. August 19, 2004 5. Perpetual	
(Date of Organization) (Duration: Year linexis	nited liability company will cease to st or "perpetual")
upon qualification	por position ,
(Date first transacted business in Florida. (See sections 608.501, 608.	502, and 817.155, F.S.)
1950 Summit Park Drive, Suite 300, Orlando, FL 32810	
(Street address of principal office)	
. If limited liability company is a manager-managed company, check he	re1
. The name and usual business addresses of the managing members or n	nanagers are as follows:
Waverly Las Olas, Inc.	
1950 Summit Park Drive, Suite 300	
Orlanda El 00040	-
Orlando, FL 32810	· · · · · · · · · · · · · · · · · · ·
0. Attached is an original certificate of existence, no more than 90 days old, duly authentic	
the jurisdiction under the law of which it is organized. (A photocopy is not acceptable, translation of the certificate under eath of the translator must be submitted.)	ii ine certificate is in a foreign language, a
,	
1. Nature of business or purposes to be conducted or promoted in Florid	ia:
Real estate holding company	<u> </u>
1/m 1/1/1/	· · · · · · · · · · · · · · · · · · ·
Signature of a member of an authorized representation	tive of a member
(In accordance with section 608.408(3), F.S., the execution of this of	document constitutes
an affirmation under the penalties of perjury that the facts stated he	men are true.)

Typed or printed name of signee

Samuel C. Stephens, III

### 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.

STATEMENT T		A REGISTERED OFFICE AND RÉGISTE	RED AGENT IN THE
1. The name of	the Limited Liabi	lity Company is:	
Waverly Las	Olas, LLC		
2. The name an	d the Florida stree	et address of the registered agent and office	are:
	B&C Corporat	e Services of Central Florida, Inc.	<del></del>
	390 North Ora	inge Avenue, Suite 1100	
	Florid	da street address (P.O. Box NOT ACCEPTABLE)	<del></del> , ·
	Orlando,	FL 32801	
		(City/State/Zip)	<del></del>
Havina haan na	mad as registered .	agent and to accept service of process for the	a ahova etatad limitad

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.

By: Holly Haworth, Vice Presider

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

## Delaware

PAGE 1

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WAVERLY LAS OLAS, 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 TWENTIETH DAY OF AUGUST, A.D. 2004.

Farriet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3307517

DATE: 08-20-04

3844967 8300

040610967