Division of Corporations

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Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : TRIAD PROFESSIONAL SERVICES, LLC

Account Number : 120020000094

Phone : (770)777-2091

Fax Number : (770)777-2094

A PE COST OF THE OT VISION OF CORPURATION

المعانوأ الشاء أأن

FOREIGN LIMITED LIABILITY COMPANY

COLE WG EATONVILLE FL, LLC

بالمستحدين والمتراكي والمتراكي والمتراكي والمتراكي والمتراكي والمتراكي والمتراكي والمتراكي والمتراكي	المانية في من المسايرة والمراس من المراس والمراس والم
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10/19/2004

TRANSMI	ITAL LETTER	
TO: Registration Section Division of Corporations		
SUBJECT: Cole WG Estonville FL, LLC	d Liability Company)	-
(1/8title of Lithite	a Lizointy Company)	
The enclosed "Application by Foreign Limited Liabil Florida," Certificate of Existence, and check are submitability company to transact business in Florida	ity Company for Authorization to nitted to register the above referen	Transact Business in ced foreign limited
Please return all correspondence concerning this matt	ter to the following:	
Kathleen Simens		
(Name	of Person)	
Cole WG Eatorwille FL, LLC		
	Company)	
(
2555 East Camelback Road, Suite 400		
(Ac	ddress)	
Phoenix, AZ 85016		
(City/State	and Zip Code)	
For further information concerning this matter, please	call:	
Kathleen Simens	at (602) 778-8748	
(Name of Person)	(Area Code & Daytime Telepho	ne Number)
STREET ADDRESS:	MAII INC ADIDITIES.	
Registration Section	MAILING ADDRESS: Registration Section	
Division of Corporations	Division of Corporations	
409 E. Gaines Street	P.O. Box 6327	li igni
Tallahassee, Florida 32399	Tallahassee, Florida 32314	
Enclosed is a check for the following amount:	·	
☐ \$125.00 Filing Fee ☑ \$130.00 Filing Fee & Certificate of Sta		iling Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Cole WG Estonville FL, LLC	7 . 7	DATE PARTIES AND ADDRESS OF THE PARTIES AND ADDR	
(Name of Poreign Limited	u Li	iointy Company)	
Delaware	3.	(FEI number, if applicable)	
(Jurisdiction under the law of which foreign limited liability company is organized)			
October 8, 2004	5.	Perpetual	
(Date of Organization)		(Duration: Year limited liability company will cease exist or "perpetual")	to
October 28, 2004			
(Date first transacted business in) (See sections 608.501 & 608.502 F			
2555 East Camelback Road, Sufta 400			
Phoenix, AZ 85016			
(Street Addre	SS 0	Principal Office)	_
. If limited liability company is a manager-manage	ed c	ompany, check here 🗸	
			
. The name and usual business addresses of the ma	i.TLBi.	ging members or managers are as follows:	
Series B, LLC			
	_		
2555 East Carnelback Road, Suite 400			
Phoenix, AZ 85016			
· translations and a second		F-63 - 5	
0. Attached is an original certificate of existence, no more than 9	0de	ysold, duly authenticated by the official having existedy of	iboor
rejurisdiction under the law of which it is organized. (A photox			8.
enslation of the certificate under outh of the translator must be su	נינטקו	mea.)	· ~\$
1. Nature of business or purposes to be conducted	or i	promoted in Florida: Real estate holdings	<u>.</u>
Transfer of profitable of Parthopas in an adventure	;	1.1.7	1 ***
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e) Um anats			**
(In accordance with section 602,408(3), an affirmation under the penalties of pe	, P.S erju		<u></u>
Kirk McAllaster, Authorized Office	COT .	of Saries B, LLC, Manager	
Typed or print	eđi	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:
Cole WG Eatonville FL, LLC
2. The name and the Florida street address of the registered agent and office are:
NRAI SERVICES, INC.
(Name)
526 E. 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 stitutes 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, Florida Statistes. (Silmanic) Sharon M. Know, ASSISTANK Socrible of Statistics 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 "COLE WG EATONVILLE FL, 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 TWELFTH DAY OF OCTOBER, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COLE WG EATONVILLE FL, LLC" WAS FORMED ON THE EIGHTH DAY OF OCTOBER, A.D. 2004.

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

38**65824** 8300

040734250

Warriet Smita Hindson
Harrier Spill Windson Strictory of Stato 4641

DATE: 10-12-04