M05000000342

(Re	equestor's Name)	
(Ad	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





500043791085

01/10/05--01004--007 **125.00

Mo1/24/05

SECRETARY OF A CONTROL SECRETARY OF THE SECRETARY OF THE



TRANSMITTAL LETTER

TO: Registration Section

Division of Corporations	
SUBJECT: Pines Apartments, LLC	
5000201.	of Limited Liability Company)
	ited Liability Company for Authorization to Transact Business in k are submitted to register the above referenced foreign limited orida
Please return all correspondence concerning	g this matter to the following:
Craig R. 1	-inlayson
	(Name of Person)
Swift & Fir	าไayson
	(Firm/Company)
Suite 590, Lincoln Towe	r, 116 E. Berry Street
	(Address)
Fort Wayne, Indiana 4	6802 (City/State and Zip Code)
	City/State and Zip Code)
For further information concerning this ma	tter, please call:
Craig R. Finlayson	at (260) 423-4422 P.D. 56
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amou	ınt:
S125.00 Filing Fee ☐ \$130.00 Filin Cert	g Fee & 🗆 \$155.00 Filing Fee & 🗀 \$160.00 Filing Fee, Certificate ificate of Status Certified Copy

Swift & Finlayson

ATTORNEYS & COUNSELORS AT LAW

Suite 590, Lincoln Tower

116 E. Berry Street

Fort Wayne, IN 46802

Telephone: (260) 423-4422

Facsimile: (260) 423-4427

E-Mail: Mail@Swift-Finlayson.com

Affiliated Firm:

LEEUW OBERLIES & CAMPBELL P.C. 320 N. MERIDIAN STREET, SUITE 1006 **INDIANAPOLIS, INDIANA 46204**

TELEPHONE: (317) 684-6960 FACSIMILE: (317) 684-6961

Of Counsel:

PATRICIA J. PIKEL

January 3, 2005

WILLIAM D. SWIFT

CHARLES D. BASH

CHARLES E. DAVIS

Grabill Office:

STATE AT MAIN GRABILL, IN 46741 (Please call; (260) 423-4422 for an appt.)

CRAIG R. FINLAYSON

E. FRANKLIN HILL, JR.

JEFFREY B. HARDING (Also admitted in Wisconsin)

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Via Certified Return Receipt Requested

7004 0550 001 3128 6538

Re:

Pines Apartments, LLC

Registration of a foreign limited liability company to transact business in Florida

Dear Gentlemen:

Enclosed per your instruction please find the following for filing with your office:

- Transmittal Letter and check for \$125.00 representing the filing fee for the 1. Application for Registration of a foreign limited liability company to transact business in Florida and Designation of Registered Agent
- Application by Foreign Limited Liability Company for Authorization to Transact 2. Business in Florida
- Certificate of Designation of Registered Agent/Registered Office 3.
- 4. Certificate of Existence of Pines Apartments, LLC dated January 3, 2005

It is my understanding that if all is found to be in order you will return a letter of acknowledgment to the attention of Mr. Craig R. Finlayson with regard to the registration of Pines Apartments, LLC. A return envelope is enclosed for your convenience.

January 3, 2005 Page 2 of 2

Thank you in advance for your assistance with this filing.

Sincerely,

SWIFT & FINLAYSON

Tammy J. Killion

Legal Assistant to Craig R. Finlayson

Enclosures

PILED
2004 JAN -7 PM 2: 56
SECRETAINSEE FLORIDA

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Pines Apartments, LLC (Name of Foreign Limited Liability Company) Indiana (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) September 9, 2004 perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") September 9, 2004 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 8023 Lima Rd., Fort Wayne, IN 46818 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here x 9. The name and usual business addresses of the managing members or managers are as follows: Edward A. Stuckey, Manager, 8023 Lima Road, Fort Wayne, IN 46818 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: Hold title to real estate

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.)

Edward A. Stuckey, Trustee of the Trust Agreement of Edward A. Stuckey dated February 9,

Typed or printed name of signee 1993 and as amended thereafter

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.

The name of the Limited Liability Company is:	
Pines Apartments, LLC	
The name and the Florida street address of the registered agent and office are:	
Edward A. Stuckey	
(Name)	
1810 52nd Street South, Apt. #1	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Gulfport FL 33707	,
City/State/Zip	-
wing been named as registered agent and to accept service of process for the above stated limited. So bility company at the place designated in this certificate, I hereby accept the appointment as registered ent and agree to act in this capacity. I further agree to comply with the provisions of all statutes ating to the proper and complete performance of my duties, and I am familiar with and accept the ligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.	
Cicola a Stucken	
ward A. Stuckey (Signature)	

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

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

PINES APARTMENTS, LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on September 09, 2004, and was in existence or authorized to transact business in the State of Indiana on January 03, 2005.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Third Day of January, 2005.

TODD ROKITA, Secretary of State 700 2005010345001