

M05000005296

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

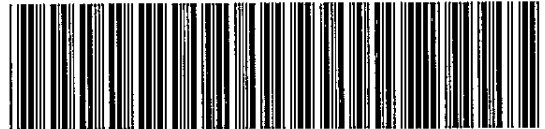
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05 SEP 26 PM 12:24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

05 SEP 26 AM 11:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 613405 128671A

AUTHORIZATION :

COST LIMIT : \$ 155.00

ORDER DATE : September 23, 2005

ORDER TIME : 9:20 AM

ORDER NO. : 613405-010

CUSTOMER NO: 128671A

CUSTOMER: Ms. Grace Rufin  
Levine & Partners, P.a.  
7th Floor  
1110 Brickell Avenue  
Miami, FL 33131

FILED  
SEP 26 PM 12:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: VILLAS AT WESTWOOD, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
       PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan -- EXT# 2955

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 TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. VILLAS AT WESTWOOD, LLC

(Name of Foreign Limited Liability Company)

2 DELAWARE

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

3. APPLIED FOR

(FBI number, if applicable)

4. SEPTEMBER 23, 2005

(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, if prior to registration.)  
(See sections 608.501 & 608.502 P.S. to determine penalty liability)

7. 3250 MARY STREET, SUITE 306, MIAMI, FLORIDA 33133

(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:

STYLES HOLDINGS, LLC, 3250 MARY STREET, SUITE 306, MIAMI, FLORIDA 33133

MANAGER

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

## HOLDINGS

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.)

STYLES HOLDINGS, LLC BY PAUL C. STEINFURTH, AS MANAGER

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:

VILLAS AT WESTWOOD, LLC

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

ALAN W. LEVINE, ESQUIRE

(Name)

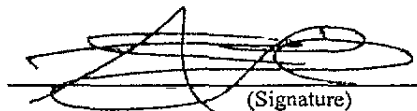
1110 BRICKELL AVENUE, SEVENTH FLOOR

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

MIAMI, FL 33131

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, Florida Statutes.*

  
(Signature)

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

# Delaware

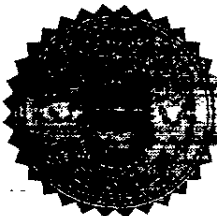
PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VILLAS AT WESTWOOD, 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-THIRD DAY OF SEPTEMBER, A.D. 2005.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VILLAS AT WESTWOOD, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF SEPTEMBER, A.D. 2005.



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

4035068 8300

AUTHENTICATION: 4178901

050781608

DATE: 09-23-05

# Delaware

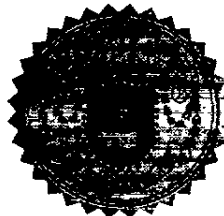
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*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

4035068 8300

050781608

AUTHENTICATION: 4178902

DATE: 09-23-05