Page 1 of 1 Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number

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From:

Account Name : TRIAD PROFESSIONAL SERVICES, LLC

Account Number : 120020000094 Phone

: (770)777-2091

Fax Number

: (770)220-1943

ELORIDA/FOREIGN LIMITED LIABILI

AMARETTO APARTMENTS, LLC

Certificate of Status	0
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Electronic Filing Menu

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Help

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

IN COMPLIANCE WITH SECTION 608,505, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LUBILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

AMARETTO APARTMENTS, LLC		
(Name of Foreign Limit	led Li	ebility Company)
Delaware	3	
(Jurisdiction under the law of which foreign limited liabili company is organized)	ily .	(FEI number, if applicable)
January 24, 2006	5	Perpetual
(Date of Organization)	٥,	(Duration: Year limited liability company will cease to exist or "perpetual")
(Date first transacted business in (See sections 608.501 & 608.502	r Flori F.S. to	ds, if prior to registration.) o determine penalty liability)
1666 JFK Causeway, Suite 606		
North Bay Village, FL 33141		
(Street Addre	533 O	Principal Office)
If limited liability company is a manager-manage	ged e	ompany, check here 🔲
_		
The name and usual business addresses of the m	anag	ing members or managers are as follows:
Scott Slota, 1666 JFK Causeway, Suite 606, North I	Bav \	/illage, FL 33141
	•	
Attached is an original certificate of existence, no more than (90 പ്പ	sold, duly authenicated by the official having oustody of recon
jurisdiction under the law of which it is organized. (A photoc		
relation of the certificate under oath of the translator must be s		
		A
. Nature of business or purposes to be conducted	iorp	romoted in Florida: aparument remais
	΄	*
Horreig Kul	بندرت	- -
Signature of a member or an	auth	orized representative of a member.
Signature of a member of an (In accordance with section 608,408(3) an affirmation under the penalties of a	auth:	orized representative of a member. the execution of this document constitutes
Signature of a member or an (in accordance with section 508.408(3)	auth:), F.S., erjury	orized representative of a member, the execution of this document constitutes that the facts stated herein are true.)

(((H060000273383)))

(((H060000273383)))

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.

FLORIDA.	IE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF
I. The name o	of the Limited Liability Company is:
AMARETTO A	PARTMENTS, LLC
2. The name a	nd the Florida street address of the registered agent and office are:
	NRAI Services, Inc.
	(Name)
	2731 Executive Park Drive, Suite 4
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
	Weston FL 33331
	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.

NRAI Selvices, Inc.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)



PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AMARETTO APARTMENTS, 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 JANUARY, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AMARETTO

APARTMENTS, LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF JANUARY,

A.D. 2006.

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



Warriet Smith Hindson, Secretary of State

arrier Smith Windsor, Secretary of State
AUTHENTICATION: 4473486

DATE: 01-24-06