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PICK-UP	WAIT MAIL	
(В	Business Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		
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SECRETARY OF STAIL
SECRETARY OF STAIL
OF CORPURATIONS
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: PARK HILL FRIENDS & FA	MILY I LLC
	ited Liability Company)
•••	bility Company for Authorization to Transact Business in bmitted to register the above referenced foreign limited
Please return all correspondence concerning this m	atter to the following:
Lynn Woerner	
(Na	me of Person)
Delaware Corporate Service	ces Inc.
(Fir	m/Company)
1220 N. Market St., Suite 8	350
	(Address)
Wilmington DE 19801	
(City/St	ate and Zip Code)
For further information concerning this matter, ple	ase call:
Lynn Woerner	at (_302) 482-4271
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS:	STREET ADDRESS:
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: [\$\sum{125.00}\$ Filing Fee \text{\$\sum{130.00}\$ Filing Fee & Certificate of }	\$\sum \\$\sum \\$\

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:

1. PARK HILL FRIENDS & FAMILY I LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the wr consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")	itten '
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)	
4. August 20, 2007 (Date of Organization) 5. perpetual (Duration: Year limited liability company will cease to exist or "perpetual")	
6. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 1221 Brickell Ave., Suite 2660 Miami, FL 33131 (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: \[\tag{2750} \tag{37} \tag{47} \]	
PINECIZEST, FL 33156	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record 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 eath of the translator must be submitted.)	ds in
11. Nature of business or purposes to be conducted or promoted in Florida:	
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.)	07 AUG 2

Typed or printed name of signce

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.

	iends & Family I LLC
If name unavai	lable, the alternate name to be used in the state of Florida is:
2. The name a	nd the Florida street address of the registered agent and office are:
	Robert Moore
	(Name)
	1221 Brickell Ave., Suite 2660
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
	Miami FL 33131 _{FL}
	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.

(Signaturo)

The many of the I builted I belilled Comments to

\$ 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

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PARK HILL FRIENDS & FAMILY I 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-FIRST DAY OF AUGUST, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PARK HILL FRIENDS & FAMILY I LLC" WAS FORMED ON THE TWENTIETH DAY OF AUGUST, A.D. 2007.

AND SOCIAL PROPERTY OF THE PRO

Harriet Smith Windsor, Secretary of State

DATE: 08-21-07

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