Division of Florida. Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000217362 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

LS

Toı

Division of Corporations

Fax Number

: (850)205-0383

Account Name . .: C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number,

: (850)878-5926

ORIDA/FOREIGN LIMITED LIABILITY (

HMW Target 1 LLC

Certificate of Status	0
Certified Copy	Û
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

82022249

8/29/2007 ZI:SI Z00Z/6Z/80

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

		'COMPLIANCE WITH SECTION 60338, FILIKIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A PO MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	<i>A</i> ₹ <u>#</u> ##			
	I.	HMW Target 1 LLC				
	••	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	-			
	Co	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the ascent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabi impany," "L.L.C.," "LLC.")	written lity			
		Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	-			
		company is organized) August 29, 2007 Perpetual				
	4.	(Date of Organization) 5. (Duration: Year limited liability company will cease to exist or "perpetual")	-			
		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) 212 Maple Drive, Hogensville, Georgia, 30230				
	7.	The state of the s	•	5		
	. ,	(Street Address of Principal Office)	-1			
	• •	Bernard Branch B				
•	8.	If limited liability company is a manager-managed company, check here	1 Danie	. 7		
1	9.	The name and usual business addresses of the managing members or managers are as follows:				
		WM 206 Timberlands, LLC - 12769 Muirfield Blvd. South, Jacksonville, Florida, 32225				
	-	* * * * * * * * * * * * * * * * * * * *		•		
objects a		The control of the co	心流力	E: "1."		
(w/		ALLEGER CONTROL OF THE CONTROL OF THE PROPERTY OF THE CONTROL OF T				
tradicional de la composition de la co	the tran	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recipits in a foreign language, a station of the certificate under onth of the manshap must be submitted.) Nature of business or purposes to be conducted or promoted in Florida:	ords in	,		
•		Real estate ownership and related matters.				
		Real estate ownership and retained matters.	200			
		1	1	•••		
		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 conscitutes an affirmation under the penaltics of perjury that the facts stated herein are true.)	AUG 29			
		John Shults, Authorized Representative				
		Typed or printed name of signee	=	\bigcirc		

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.

	HMW Target 1 LL	the Limited Liability Comp	pany is:			
	If name unavail	able, the alternate name to b	pe used in the state of Fl	orida is:		
	2. The name an	d the Florida street address	of the registered agent i	and office are:		!
	**		Corporation System		n, n vi	
			(Name)			
		1200	South Pine Island Road			
	Control (September 1987)	Florida Street Add	ress (P.O. Box NOT ACCE	TABLE)	Control of the Control	March Committee
•		- 1、1、1、1、1、1、1、1、1、1 - こまわかかり Plantation いたいねり	en en grande en	33324	Gun herr Joseph	हेर व्यक्ति विक्रमात् १ १ (५५)
The second secon	المراجع من		City/State/Zip	,	. 3% (Co Fig.) *	Mark Title . Top ! fear.
•						
रिक्ष (१) १० (कार करते हैं स्थान है। १० से ११ रे स्थान करता करता है। १९ १८ १९ १९ से स्थान है।	liability company is agent and agree relating to the pr obligations of my	ned as registered agent and is at the place designated in to act in this capacity. I furt to act in this capacity. I furt oper and complete performance position as registered agent CT Corporation System (Signature)	his certificate, I hereby a her agree to comply with ince of my duties, and I a	scept the appointme the provisions of al an familiar with and oter 608, Florida Sta	ent as registered Il statutes I accept the	
		\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Filing Fee for Application of Regis Certified Copy (option Certificate of Status (tered Agent nal)	IT AUG 29 AH II: 04 ECRETARY OF STATE LLAHASSEE, FLORID	

71:21 7002/25/80 828222812



PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HMW TARGET 1 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-NINTH DAY OF AUGUST, A.D. 2007.

4414739 8300 070968477



Names Smiles Minden

Harriet Smith Windson, Secretary of S AUTHENTICATION: 5963042

DATE: 08-29-07

88/29/2007 15:17 8502227615