

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.

(((H07000243718 3)))



H070002437183ABC%

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

LS

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name :

: C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)222-1092

Phone Fax Number

: (850)878-5926

\*RE-SUBIMIT\*
Please retain original filing date of submission 10/1/07

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

SAH River Oaks, LLC

SECIENT SIME SECIENTS SECURITY SECURITY

 Certificate of Status
 0

 Certified Copy
 0

 Page Count
 04.5

 Estimated Charge
 \$125.00

97 OCT -1 All 9: 3

Electronic Filing Menu

Corporate Filing Menu

Help

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

8285554972

10/1/2007 ET:91 Z002/80/01 . 850-617-8381



October 2, 2007

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: SAH RIVER OAKS, LLC

REF: W07000048682

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please provide the NAME of the manager in line 9.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered shandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers Regulatory Specialist II FAX And. #: H07000243718 Letter Number: 207A00057503

P.O BOX 6327 - Tallahassee, Florida 32314

CI COSS

18/88/5887 15:13 858227815

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

IN COMPLIANCE WITH SECTION FOR HIS, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIBILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF PLORIDA: 1. SAH River Oaks, LLC (Name of Poreign 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 written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C." "LLC." 2 Delaware (FEI number, if applicable) (Inriediction under the law of which foreign limited liability company is organized) 4. July 13, 2007 5. perpetual (Duration: Year limited liability company will cause to exist or "perpetual") (Date of Organization) (Date first transacted business in Florida, if prior to registration.) (See sections 603.501 & 608.502 F.S. to determine poneity liability) 7. 6420 SW MacAdam Ave., Suite 100 Portland, OR 97239 (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: 6420 SW MacAdam Ave. Portland OR 97239 10. Attached in an original certificate of existence, no more than 90 days old, duly authenticated by the official, having custedly of records in the pulsifiction under the law of which it is commised. (A photocopy is not acceptable. If the certificate is in a furcion is some as translation of the certificate under outh of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: real estate investment Signature of a member of an authorized representative of a member. (In accordance with section 608.498(3), F.S., the seacution of this decoment constitutes an afformation under the populate of parjury that the facer stated torsin are true.) Dinesh Davar

10/08/2004 12:13 82022/612

Typed or printed name of signee

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608 A15 & 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:	
SAH River Oaks, LLC	
If name unavailable, the alternate name to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	——————————————————————————————————————
CT Corporation System	
(Naroe)	
1200 South Pine Island Road	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Plantation, FL 33324 FL	
City/State/Zip	
Having been named as registered agent and to accept service of process for the above state liability company at the place designated in this certificate. I hereby accept the appointmen agent and agree to act in this capacity. I further agree to comply with the provisions of all relating to the proper and complete performance of my duties, and I am familiar with and a obligations of my position as registered agent as provided for in Chapter 608, Florida State	t as registered statutes uccept the
W. T. Totalla (Geographic) M.T. FITZPATRICK ASSISTANT SECRETARY	
\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent	
\$ 30.00 Certified Copy (optional)	

\$ 5.00 Certificate of Status (optional)

CI COKE

10/08/2001 12:13 820222421

AH 9:

# Delaware

PAGE I

## The First State

I, HARRIST SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SAH RIVER OAKS, LLC" IS DOLY PORMED 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-BIGSTH DAY OF SEPTEMBER, A.D. 2007.

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

MECKET SELECT STATE

**4388934 8300** 0710**662**10



Warriet Smile Hinden
Henriet Smith Wardson, Secretary of State
AUTHENTICATION: 6036882

DATE: 09-28-07