

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.

(((H07000259954 3)))



H070002689543AHCE

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

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

: (850)222-1092

Pax Number

(850)878-5926

SECRETARY OF STATE

FLORIDA/FOREIGN LIMITED LIABILITY CO.

RECEIVED

OCT 19 PM 4: 11

ECRETARY OF STATE

County Line Road Florida LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

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

10/19/2007

PAGE 01/04

CT CORP

9192222098 87:91 2002/61/01 NRC

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

IN COMPLIANCE WITH SECTION 608308, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: County Line Road Floride 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 Pierida and attach a copy of the written consent of the managers or managing members adopting the alternate mans. The alternate name must include "Limited Liability Company," "LLC.," "LLC.") 3. 26-1232262 2. New York Jurisdiction under the law of which foreign limited liability (FEI gumber, if applicable) company is organized) 4, 10-9-07 Perpetual (Duration; Year limited liability company will cease to exist or "perpetual") (Date of Organization) Upon filing of Application (Date first transacted business in Florida, if prior to registration.) (See sections 602.501 & 608.502 F.S. to determine penalty liability) 1 South Washington Street, Suite 200, Rochester, New York, 14614 (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: CPH Florida LLC, Member 1 S. Washington Street, Suite 200, Rochester, New York, 14614 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 cartificate under each of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Hold title to real property nused Win Signature of a member or an authorized representative of a member. (In accordance with motion 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) Both R. Cross-Witholm, Authorized Representative Typed or printed name of signee

10/13/2007 15:48 8502227615

FL057 - 04/28/2007 C 7 Byssen Callins

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.

If name unevail	able, the alternate name to b	oe used in the state of	f Florida is:	10 9
2. The name an	d the Florida street address	of the registered age	ent and office are:	eca i
	Chri	istopher M. Feer,Req.		SS
		(Narse)		用分子
	^-	o Lake Morton Drive		To se
		ross (P.O. Box NOT A	WANTA DI ITA	95 X
			~=rinacuy,	
	Lekeland	W.	33801	
		FI, City/State/Zip		
liability company agent and agree relating to the problemations of my By.	ned as registered agent and to at the place designated in the to act in this capacity. I furtioper and complete performa operation as registered agent (Signature)	Chylinautzho lo accept service af pi his certificate, i heret her agree to comply moe of my dutes, and	rocses for the above stat by accept the appointme with the provisions of all I am familiar with and	st as registered statutes secont the
liability company agent and agree relating to the problemations of my By.	ned as registered agent and to the place designated in the to act in this capacity. I furt oper and complete performa position as registered agent (Signature)	Chy/Biata/Zhp to accept service of pi his certificate, I heret her agree to comply to noe of my duttes, and t as provided for in C	rocses for the above stat by accept the appaintme with the provisions of al I am familiar with and hapter 608, Florida Sta	st as registered statutes secont the
liability company agent and agree relating to the problemations of my By.	ned as registered agent and to at the place designated in the capacity. I furt open and complete performation as registered agent (Signature) 1. (Signature) 5. 100.00	Chy/Siate/Zhp to accept service of pi his certificate, I heret her agree to comply t moe of my duttes, and t as provided for in C Filling Fee for Api	rocses for the above stating accept the appaintment the provisions of all i am familiar with and hapter 608, Plorida Statellians of the provisions of the pr	st as registered statutes secont the
liability company agent and agree relating to the problemations of my	ned as registered agent and to at the place designated in it to act in this capacity. I furticiper and complete performa position as registered agent (Signature) 1. (Signature) 1. Esq. 5. 100.00 8. 25.00	Chy/State/Zhp to accept service of pi his certificate, I heret her agree to comply to moe of my duttes, and t as provided for in C	rocses for the above stately accept the appointment with the provisions of all i am familiar with and hapter 608, Plorida State hapter 608, Plorida State with a state of the provision of the pr	st as registered statutes secont the

State of New York Department of State } ss

I hereby certify, that COUNTY LINE ROAD PLORIDA LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 10/09/2007, and that the Limited Liability Company is existing so far as shown by the records of the Department.



Witness my hand and the official seal of the Department of State at the City of Albany, this 18th day of October two thousand and seven.

Daniel Shapiro

Special Deputy Secretary of State

200710190319 + EZ