# M0700006881

(F	Requestor's Name)	
(A	Address)	
. (A	Address)	
(C	City/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
· (E	Business Entity Nar	ne)
(C	Ocument Number)	<del></del>
Certified Copies	Certificates	s of Status
Special Instructions to	o Filing Officer:	/
	J/(	





300111626303

11/26/07--01005--007 \*\*320.00



FILED

07 NOV 26 PM 12: 59

SECRETARY OF STATE TALLAHASSEE, FLORIDA

nk



UCC FILING & SEARCH SERVICES, INC. 1574 Village Square Blvd Ste 100
Tallahassee, Florida 32309
(850) 681-6528

HOLD
FOR PICKUP BY
UCC SERVICES
OFFICE USE ONLY

November 26, 2007

#### **CORPORATION NAME (S) AND DOCUMENT NUMBER (S):**

	Ocala Impr	ovements, LLC	. ,	` ,
				125 T
Filing Evidence  □ Plain/Confirmatio	n Copy		Type of Document dertificate of Status	CRETARY OF STATES
□ Certified Copy		⊠ C	ertificate of Good S	Standing
		□А	rticles Only	P
Retrieval Reque	<u>st</u>	A	Il Charter Documer articles & Amendme ictitious Name Cert	ents
□ Certified Copy		□ O	Other	
NEW FILINGS  Profit  Non Profit  Limited Liability  Domestication		AMENDMENTS  Amendment  Resignation of RA Offic  Change of Registered Ag  Dissolution/Withdrawal		
Other		Merger Merger		
OTHER FILINGS		REGISTRATION/QUA	LIFICATION	
Annual Reports Fictitious Name Name Reservation	X	Foreign Limited Liability Reinstatement		
Reinstatement		Trademark		

Other

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

IN COMPILANCE WITH SECTION 608.503, FLORIDA STATUTE LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE S	
Ocala Improvemente LLC	
Ocala Improvements, LLC     (Name of Foreign Limited Liability Company; must include the company).	le "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company," "L.L.C.," "LLC.")	
2. Delaware 3.	
(Jurisdiction under the law of which foreign limited liability company is organized)	( FEI number, if applicable)
4. 08/08/07 5.	perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6	
(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S. t	rida, if prior to registration.) to determine penalty liability)
580 White Plains Road, 3rd Floor	
Tarrytown New York 10591	f Principal Office)
(Street Address o	rrincipal Office)
B. If limited liability company is a manager-managed of	company, check here 🗹
9. The name and usual business addresses of the mana	ging members or managers are as follows:
First Man Ocala Corp.	
580 White Plains Road, 3rd Floor	
300 White Plains Road, Std Floor	
Tarrytown New York 10591	
0. Attached is an original certificate of existence, no more than 90 da	rys old duly authenticated by the official having custody of records in
he jurisdiction under the law of which it is organized. (A photocopy	
ranslation of the certificate uncler oath of the translator must be submi	itted.)
1. Nature of business or purposes to be conducted or p	promoted in Florida:
To purchase, own, sell and finance real groperty in the st	ate of Florida.
Ocala Improvements LLC, a Delaware Limited Liability Company By:	First Man Ocala Corp. a Delaware Corporation, its Manager:
Signature of a member or an auth	norized representative of a member.
	,, the execution of this document constitutes
Adam Ifshin, President	
Typed or printed r	name of signee

### 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.

1. The name of	of the Limited Liability Company is:	
Ocala Improverr	nents, LLC	
If name unavail	ilable, the alternate name to be used in the state of Florida is:	
2. The name ar	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)		
	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 Services, Inc.

By:

(Signature)

Laura Lightholder, 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)

PAGE 1

## Delaware

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OCALA IMPROVEMENTS, 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 NINETEENTH DAY OF NOVEMBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OCALA IMPROVEMENTS, LLC" WAS FORMED ON THE EIGHTH DAY OF AUGUST, A.D. 2007.

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

TANKS OF THE PARTY OF THE PARTY

4403832 8300 071239618 Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 6173471

DATE: 11-19-07