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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates	s of Status	
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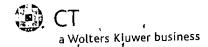
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DEFENDATION OF THE PROPERTY OF THE PROPERT

B. KOHR

APR - 4 2008

EXAMINER

OB APR -4 PM 12: 30



CT 1203 Governors Square Blvd Tallahassee, FL 32301-2960 850 222 1092 tel 850 222 7615 fax www.ctlegalsolutions.com 160.W

April 4, 2008

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re:

Order #: 7204802 SO

Customer Reference 1:

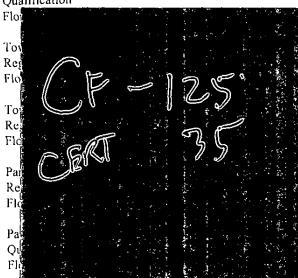
None Given

Customer Reference 2:

Dear Department of State, Florida:

Please file the attached:

Townhomes of Journey Services Corporation (GA) Qualification



CALL M. C. SONOR

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Townhomes of Journey GP, LLC (Name of Foreign Limited Liability Company; must include the company).	
(Name of Foreign Limited Liability Company; must include	de "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpos consent of the managers or managing members adopting the alter Company," "L.L.C.," "LLC.")	e of transacting business in Florida and attach a copy of the written nate name. The alternate name must include "Limited Liability
_{2.} Georgia 3	26-2305269
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. February 13, 2008 5	Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. N/A	
(Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.	rida, if prior to registration.) to determine penalty liability)
7. 2730 Cumberland Boulevard	rida, if prior to registration.) to determine penalty liability)
Smyrna, Georgia 30080	
(Street Address o	of Principal Office)
8. If limited liability company is a manager-managed	company, check here 🗸
9. The name and usual business addresses of the mana	ging members or managers are as follows:
Townhomes of Journey Services Corp	poration
2730 Cumberland Boulevard	
Smyrna, Georgia 30080	
the jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under oath of the translator must be subm	itted.)
11. Nature of business or purposes to be conducted or	promoted in Florida: Real Estate Development
_leule le d	ulu
	horized representative of a member. S., the execution of this document constitutes ry that the facts stated herein are true.)

Typed or printed name of signee

Mark M. duMas

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 the Limited Liability Compa	ny is:	
Townhomes of Journey GP, LLC		
If name unavailable, the alternate name to be	used in the state	e of Florida is:
2. The name and the Florida street address of	f the registered a	agent and office are:
CT Corporation Syste	∍m	
***************************************	(Name)	
1200 South Pine Isla Florida Street Addre		CACCERTARIE)
Florida Street Addit	33 (1.0. DOX 1101	ACCEPTABLE
Plantation	FL	33324
	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.



\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

Control No. 08012730

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

TOWNHOMES OF JOURNEY GP, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 02/13/2008 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 2nd day of April, 2008

Karen C Handel Secretary of State

faun CHandel

Certification Number: 2667380-1 Reference: 23151.10

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp