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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: BLUEGREEN COMMUNIT	ΓΙΕS, LLC
(Name of I	Limited Liability Company)
	DAWN S. FOX (Name of Person) BLUEGREEN CORPORATION (Firm/Company) 4960 CONFERENCE WAY NORTH, STE. 100 (Address) BOCA RATON, FL 33431 (City/State and Zip Code) ther information concerning this matter, please call: DAWN S. FOX (Name of Person) at (561) 912-8004 (Area Code & Daytime Telephone Number) MAILING ADDRESS: Division of Corporations P.O. Box 6327 Clifton Building
Please return all correspondence concerning th	is matter to the following:
DAWN S. FOX	
	(Name of Person)
BLUEGREEN CORPORAT	ΓΙΟΝ
	(Firm/Company)
4960 CONFERENCE WAY	Y NORTH, STE. 100
	(Address)
BOCA RATON, FL 33431	
(City	y/State and Zip Code)
For further information concerning this matter,	please call:
DAWN S. FOX	at (561) 912-8004
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS:	
•	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: ■ \$125.00 Filing Fee Certificat	e & 🗆 \$155.00 Filing Fee & 🗖 \$160.00 Filing Fee, Certificate te of Status — Certified Copy — of Status & Certified Copy

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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE	E STATE OF FLORIDA:
1. BLUEGREEN COMMUNITIES, LLC	
(Name of Foreign Limited Liability Company; must incl	ude "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purper consent of the managers or managing members adopting the alte Company," "L.L.C.," "LLC.")	ose of transacting business in Florida and attach a copy of the writtenemate name. The alternate name must include "Limited Liability
2. DELAWARE	_{3.} 26-2885694
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. JUNE 27, 2008	_{5.} PERPETUAL
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6.	
(Date first transacted business in FI (See sections 608.501 & 608.502 F.S	
7. 4960 CONFERENCE WAY NORTH, STE	E. 100,
BOCA RATON, FL 33431	
(Street Address	of Principal Office)
8. If limited liability company is a manager-managed	f company, check here
9. The name and usual business addresses of the mar	naging members or managers are as follows: 🗢 🚆
DANIEL C. KOSCHER, TERRELL R. JO	NES & ANTHONY M. PULEO
4960 CONFERENCE WAY NORTH, STE	E. 100,
BOCA RATON, FL 33431	
the jurisdiction under the law of which it is organized. (A photocoptranslation of the certificate under oath of the translator must be sub-	mitted.)
11. Nature of business or purposes to be conducted o	r promoted in Florida:
ANY LAWFUL PURPOSE	<i>Q</i>
	athorized representative of a member.
(In accordance with section 608.408(3), I an affirmation under the penalties of perj	· ·
ANTIFORY	M. PULEO, UP + TROMSUMON
'Typed or printed	d 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.

If name unavailable, the alternate name to be used in the state of Florida is:				
2. The name	e and the Florida street address	s of the registered agent and office are:		
	Corporation Service C	Company		
		(Name)	•	
	1201 Hays Street			
	Florida Street Ac	ddress (P.O. Box NOT ACCEPTABLE)	•	
	Tallahassee	FL 32301		
		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.

Corporation Service Company

BY: Cynthia L. Harris

(Signature)

Cynthia L. Harris

Asst. Vice President

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

Delaware

PAGE

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BLUEGREEN COMMUNITIES, 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-FOURTH DAY OF JULY, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BLUEGREEN COMMUNITIES, LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF JUNE, A.D. 2008.

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

4568468 8300

080813833

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6749286

DATE: 07-24-08

You may verify this certificate online at corp.delaware.gov/authver.shtml