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### Florida Department of State

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#### FLORIDA/FOREIGN LIMITED LIABILITY CO.

CMF 15 Portfolio LLC

| Certificate of Status | 0        |
|-----------------------|----------|
| Certified Copy        | 0        |
| Page Count            | 06       |
| Estimated Charge      | \$125.00 |

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FEB 13 2009

EXAMINER

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# 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.  | CMF 15 Portfolio LLC  |          |          |
|-----|---|----------|----------|
|     | (Name of Foreign Limited Liability Company)   |          |          |
| 2.  | Delaware  |          |          |
| _ , | (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)  |          |          |
| 4,  | January 20, 2009  5. Perpenual (Date of Organization)  (Ourstion: Year limited liability company will coase to  |          |          |
|     | exist or "perpetual")   |          |          |
| 6.  | (Date first transacted business in Florida, if prior to registration.) (See sections 608,501 & 608,502 F.S. to determine penalty liability)   |          |          |
| 7.  | 2101 6th Avenue North, Suite 750  | _        |          |
|     | Birmingham, AL 35203  | 09 F     |          |
|     | (Street Address of Principal Office)  | FE8      | *****    |
| 8.  | If limited liability company is a manager-managed company, check here   | 2        | _        |
| 9.  | The name and usual business addresses of the managing members or managers are as follows:   | A        | П        |
|     | Colonial Realty Limited Partnership   | ე<br>ფ   | <b>L</b> |
|     | 2101 6th Avenue North, Suite 750  | 0        |          |
|     | Birmingham, AL 35203  |          |          |
| cui | . Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having stody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the cert in a foreign language, a translation of the certificate under oath of the translator must be submitted.) | tificate |          |
| 11  | . Nature of business or purposes to be conducted or promoted in Florids: Own and operate real property  |          |          |
|     |   |          |          |
|     | * ball Sun  |          |          |
|     | Signature of a member or an authorized representative of a member.  (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of periory that the facts stated herein are true.)  |          |          |
|     | JERRY A. SLEWER   |          |          |
|     | Typed or printed 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.

| CMF 15 Pontolio LLC  |                   |                        |                      |                                |   |  |  |
|--|-------------------|------------------------|----------------------|--------------------------------|---|--|--|
| If name unavailable, the alternate name to be used in the state of Florida is: |                   |                        |                      |                                |   |  |  |
| 2. The name and the Florid   | la street address | of the registered ag   | gent and office are: | TAS O                          | · |  |  |
| C T Corporation System   |                   |                        |                      | 19F                            |   |  |  |
|  |                   | (Name)                 |                      | 09 FEB 1<br>SECRETA<br>ALLAHAS | 1 |  |  |
|  | 1200 \$           | South Pine Island Rose | q                    | SECRETARY OF<br>LLAHASSEE, F   |   |  |  |
| Florida Street Address (P.O. Box NOT ACCEPTABLE)                               |                   |                        |                      |                                | - |  |  |
|  | Plantation        | FL                     | 33324                | M 8: 50<br>F STATE<br>FLORID   |   |  |  |
|  |                   | City/State/Zip         |                      | - DE O                         |   |  |  |

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.

By: Terence Hardley Asst. Secretary
(Signature)

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

# Delaware

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#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CMF 15 PORTFOLIO 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 ELEVENTH DAY OF FEBRUARY, A.D. 2009.

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

09 FEB 12 AM 8: 50

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

jeffrey W. Bullock, Secretary of State

DATE: 02-11-09