# M09000003805

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(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
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**EXAMINER** 

# DEPARTMENT OF STATE ACCOUNT FILING COVER SHEET

Account Number	FCA00000017								
Date:	9/25/09	09 SEP 25 PM 3: 44							
Requestor Name:	Carlton Fields								
Address:	Post Office Box 190 Tallahassee, Florida 32302								
Telephone:	(850) 513-3619 (direct) (850) 224-1585								
Contact Name:	Kim Pullen, CP, FRP								
Corporation Name:	Ocala Place	2008, LLC							
Entity Number (if appli	cable): Im Pull	2~							
Certified Copy		Certificate of Status							
New Filings	Plain Stamped Copy	Annual Report							
Fictitious Name	Amendments	Registration							
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X )Call When Ready	(X) Call if Problem	( ) After 4:30							
X ) Walk In	( )Will Wait	(X) Pick Up							
) Mail Out									
CF Internal Use Only Client: 54622 Ma									
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### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Ocala Place 2008 L.L.C.  (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 Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")  2. Michigan (Jurisdiction under the law of which foreign limited liability company is organized)  4. September 8, 2009 (Date of Organization)  5. Perpetual (Duration: Year limited liability company will cease to "perpetual")  6. Upon qualification (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)  7. 20250 Harper Avenue  Detroit, MI 48225
2. Michigan (Jurisdiction under the law of which foreign limited liability company is organized)  3. 27-0878962 (FEI number; if applicable)
4. September 8, 2009  (Date of Organization)  5. Perpetual  (Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon qualification  (Date first transacted business in Florida, if prior to registration.)  (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 20250 Harper Avenue
Detroit, MI 48225  (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:
American Community Developers, Inc.
20250 Harper Avenue
Detroit, Mi 48225
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 certificate under eath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: operation of a 40-unit apartment complex in Ocala, FL  Signature of a member or an authorized representative of a member.
(In accordance with acction 608.408(3), FfS., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Thomas R. Lacey, Vice President of American Community Developers, Inc., Manger of Ocala Place 2008 L.L.C.

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.

1. The name of the	Limited Liability	Comp	any is:			70
Ocala Place 20	08 L.L.C.		<del></del>			·
If unavailable, the a	lternate to be used	in the	state of Florida i	s:		
2. The name and th	e Florida street add	dress o	of the registered a	gent and office	are:	
Am	erican Communi	ity De				
-			(Name)			
350	0 10th Street N.		· · · · · · · · · · · · · · · · · · ·			
	Florida Stre	et Addı	ress (P.O. Box <u>NOT</u>	ACCEPTABLE)		
	Naples		FL City/State/Zip	34	4102	
Having been named liability company at agent and agree to a relating to the proper obligations of my post	the place designate ct in this capacity. r and complete per sition as registered  (Signature) resident of American er of Ocala Place 2006	d in the I find the formar agent  Comme	o accept service of is certificate, I he ier agree to compl nce of my duties, a as provided for in	eby accept the c y with the provi nd I am familian Chapter 608; F	appointment a sions of all sto with and acc	is registered atutes cept the
	\$ 2	0.00 5.00	Filing Fee for A Designation of	Registered Age	ent	
		0.00 5.00	Certified Copy Certificate of St			

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This is to Certify That

#### OCALA PLACE 2008 L.L.C.

was validly organized on September 8, 2009 as a Limited Liability Company. Said Limited Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission 996877

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 25th day of September, 2009

John Director

Bureau of Commercial Services