Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

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Foreign Limited Liability Company Stonehenge Community Development XXX, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

COVER LETTER

SURJECT:	Stonehenge	Community Development XXX, LLC			
		Name of Limited Liability Company			
		dability Company for Authorization to Transact Business in Florida," Certificate above referenced foreign limited liability company to transact business in Flori			
Please return all corre	espandence concorning this	matter to the following:			
-		Name of Person			
		Firm/Company			
	Address				
-		City/State and Zip Code			
	ascol	eman@stonehengecapital.com.			
	E-mail addres	s: (to be used for future annual report polification)			
For further information	n concerning this matter, p	olease cuil:			
		at ()			
	Name of Person	Area Code & Daytime Telephone Number			
	27	STREET ADDRESS: Division of Corporations Registration Section Cliffon Building 2661 Executive Center Circle Tallahasses, FL 32301			
Enclosed is a chec	ck for the following an	nount:			
\$125.00 I		iling Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate the of Status & Certified Copy			

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

IN COMPLIANCE WITH SECTION 60850B, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Stonehonge Community Development XXX, LLC (Name of Foreign Lumited 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.") Delaware (FEI number, if applicable) (huisdiction under the law of which foreign limited liability company is organized) 12/18/2006 (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") 6. Upon Filing (Date lirst transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 191 W. Nationwide Blvd., Suite 600, Columbus, OH 43215 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here The name and usual business addresses of the managing members or managers are as follows: Stonehenge Community Development, LLC - 191 W. Nationwide Blvd., Suite 600, Columbus, OH 43215 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 each of the translator must be submitted.) Any lawful act or activity 11. Nature of business or purposes to be conducted or promoted in Florida: as provided by the/florida Statute 6083,503 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 ponalties of perjury that the facts stated heroin are true.) John P. Witten 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	of the Limited Liability Compa	my is:	
	Stonchenge Comm	unity Development XXX, LLC	
If unavailable,	the alternate to be used in the	state of Florida is:	
2. The name a	and the Florida street address o	f the registered agent and office	
	CT	Corporation System	10 MAR SECURIO
		(Name)	R-2
		outh Pine Island Road	R-2 M NASSEE.
	Florida Street Addr	4 8: 04 FSIATE FLORID	
	Plantation	FL 33324	REP.
		City/State/Zip	
liability compa agent and agre relating to the j	ny at the place designated in the e to act in this capacity. I furth proper and complete performa	accept service of process for the is certificate, I hereby accept the er agree to comply with the prov ice of my duties, and I am familia as provided for in Chapter 608, i	appointment as registered isions of all statutes or with and accept the
Ey:	Corporation System	Connie Bryan	
	(Signature) 0 AS	sistant Secretary	
	\$ 100.00	Filing Fee for Application	
	\$ 25,00	Designation of Registered Ag	ent

\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "STONEHENGE COMMUNITY DEVELOPMENT XXX, 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 SECOND DAY OF MARCH, A.D. 2010.

AND I DO REREBY FORTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

100234632

AUTHENTICATION: 7841846

DATE: 03-02-10