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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

: NRAI CORPORATE SERVICES, INC. Account Name

Account Number : 1200800000023

Phone : (651)225-9500

Fax Number : (651)225-9579 Ć,

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address				

Foreign Limited Liability Company MF Westpark, LLC



بمنشوح بهرينيو المستحدم	
Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

EXAMINER

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Help

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

	NCE WITH SECTION 608303, FLOI BILITY COMPANY TO TRANSACT BUS		FOLLOWING IS SUBMITTED TO RIA IFFLORIDA:	JASTEICA FOL
•		MF <u>Westpark,</u> t	LC ted Liability Company," "L.L.C.," or "	
(Name	of Foreign Limited Liability Compa	ny; must include "Limi	ted Liability Company," "L.L.C.," or "	LLC.")
onsent of the	allable, enter alternate name adopted managers or managing members adL.C," "LLC.")	for the purpose of tran	secting business in Florida and attach to ne. The alternate name must include "L	copy of the vimited Liability
•	Delaware	3.	(FSI number, if applicable)	
company is	organized)	ited liability	(FEI number, if applicable)	
	12/18/2009 (Date of Organization)	5,	perpetual ation: Year limited liability company v	
	(Date of Organization)	(Dur exist	ation: Year limited liability company v or "perpetual")	-4
_				ALL
·	(Date first transacted (See sections 608.501 &	business in Florida, if p & 608.502 F.S. to determ	rior to registration.) nine penalty liability)	AHASSI
				SSEARY
	ha Madi Oansiina 00077			SEE. FLORIDA
	(S	treet Address of Princi	pal Office)	92
. If limited	d liability company is a manag	er-managed compai	ny, check here 🗸	RIOA
. The nam	e and usual business addresses	of the managing m	embers or managers are as follo	ws:
	rtfolio investment, LLC			
13860	Ballantyne Corporate Place	, Suite 130		·
Charlot	tte, North Carolina 28277			
re jurisdiction anslation of t	under the law of which it is organized the certificate under ceth of the translate	l. (A photocopy is not ac or must be submitted.)	duly authenticated by the official having ceptable. If the certificate is in a foreign ted in Plorida: Any lawful act	language, a
	a construction of the construction of the	one and an promo		
	la de la companya della companya del	100		
	(in accordance with section	n 608.408(3), F.S., the ext	representative of a member. cution of this document constitutes cliets stated herein are true.)	
	_	Arthur Nevi	<u>d</u>	
	Туре	d or printed name of	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 Company is:				
MF Westpark, LLC				
If unavailable, the alternate to be used in the state of Florida is:				
2. The name and the Florida street address of the registered agent and office are:				
NRAI Services, Inc.	2			
(Name)	71110 HAR -3			
2731 Executive Park Drive, Sulte 4	2			
Florida Street Address (P.O. Box NOT ACCEPTABLE)	ယ်			
	至 88			
Weston, FIr § 3331 City/State/Zip				
	46			
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 registere 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. WHAT Services Accept from Asserting for the above stated limited liability accept the Accept the Accept from Asserting for the Accept from Asserting for the above stated limited liability accept the appointment as registered agent 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. [Signature] [Signature] [Signature]	:d			
\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent				

\$ 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 "MF WESTPARK, 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 THIRD DAY OF MARCH, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MF WESTPARK, LLC" WAS FORMED ON THE EIGHTEENTH DAY OF DECEMBER, A.D. 2009.

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

100240118

AUTHENTICATION: 7845104

DATE: 03-03-10

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