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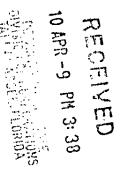
| (Requestor's Name) |
|------------------------------------------------------------------------------------|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: Please Call When Ready 656-7956 Melissa |

Office Use Only



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B. KOHR

APR 1 2 2010

EXAMINER

10 APR -9 AM 8: LL

COVER LETTER

| UBJECT: Encore Housing Opp | portunity Fund Investment Manager, LLC Name of Limited Liability Company |
|---------------------------------------------------|------------------------------------------------------------------------------------------|
| The enclosed "Annlication by Foreign Limited | Liability Company for Authorization to Transact Business in Florida, |
| Existence, and check are submitted to register to | the above referenced foreign limited liability company to transact business in Prortica, |
| Please return all correspondence concerning th | is matter to the following: |
| | Melissa |
| | Name of Person |
| | Incorporating Services, Ltd. |
| | Firm/Company |
| | 1540 Glenway Drive |
| | Address |
| | Tallahassee, FL 32301 |
| | City/State and Zip Code |
| | acabico@howardrice.com |
| | ess: (to be used for future annual report notification) |
| For further information concerning this matter, | please call: |
| Melissa | at () 656-7956 |
| Name of Person | Area Code & Daytime Telephone Number |
| MAILING ADDRESS: | STREET ADDRESS: |
| Division of Corporations | Division of Corporations |
| Registration Section | Registration Section |
| P.O. Box 6327 Tallahassee, FL 32314 | Clifton Building 2661 Executive Center Circle |
| | ZOOF EXECUTIVE CENTER CINCIE |

\$125.00 Filing Fee \$\ \text{Certificate of Status} \] \$155.00 Filing Fee & \text{Certified Copy} \] \$160.00 Filing Fee, 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:

| · | |
|---------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| 1. Encore Housing Opportunity Fund Inve (Name of Foreign Limited Liability Company; must include "Limited" | stment Manager, LLC |
| (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 transact | ing business in Florida and attach a copy of the written |
| consent of the managers or managing members adopting the alternate name. I | The alternate name must include "Limited Liability |
| Company," "L.L.C," "LLC.") | , (2) |
| _ | (FEI number, if applicable) perpetual perpetual pr: Year limited liability company will cease to |
| 2. Delaware 3 | (FEI number, if applicable) |
| (Jurisdiction under the law of which foreign limited liability | (FEI number, if applicable) |
| company is organized) | . رئي |
| 4. March 30, 2010 5. | nemetual |
| (Date of Organization) (Duratio | perpetual n: Year limited liability company will cease to |
| exist or ' | "perpetual") |
| • | · ! |
| 6. <u>April 1, 2010</u> | |
| (Date first transacted business in Florida, if prior (See sections 608.501 & 608.502 F.S. to determine | to registration.) |
| (See sections 008.301 & 008.302 P.S. to determine | c polarcy habitity) |
| 7. <u>1951 N.W. 19th Street, Suite 200, Boca Raton, FL 3343</u> | i 1 |
| 7. 1931 (V.W. 19th Street, Spile 200, Duca Haton, FL 3543 | |
| | |
| (Street Address of Principal | ; Affical |
| (Sitteet Address of Principal C | : |
| 0 1611 | |
| 8. If limited liability company is a manager-managed company, | check here |
| | |
| The name and usual business addresses of the managing mem | pers or managers are as follows: |
| | |
| Avila Encore LLC - 1951 N.W. 19th Street, Suite 200, Boca F | aton, FL 33431 |
| | |
| Encore AF Investor, LLC - 1951 N.W. 19th Street, Suite 200, | Boca Baton, El. 33431 |
| 1001 1111 1011 1011 1011 | |
| , , | |
| | : |
| | |
| 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 accep | table. If the certificate is in a foreign language, a |
| translation of the certificate under oath of the translator must be submitted.) | |
| , | ; |
| 11. Nature of business or purposes to be conducted or promoted | in Florida: |
| | in i torida. |
| !m. m. m | |
| nvestment manageme | SUI . |
| (dan () | |
| - Jul | · |
| Signature of a memor or an authorized re | presentative of a member. |
| (In accordance with section 608.408(3), F.S., the execut | ion of this document constitutes |
| an affirmation under the pepalticologic encountries that the Well | finglated herein are true.) |
| By: Anthony Avila, its Pres | sident |
| Typed or printed name of s | ionee |

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:

| • | • |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|
| Encore Housing Opportunity Fund Inve | stment Manager, 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: |
| Anthony Avila (Name) | |
| 1951 N.W. 19th Street, S Florida Street Address (P.O. Box NO | |
| Boca Raton, FL 334 | 131 |
| City/State/Zip | |
| Having been named as registered agent and to accept service liability company at the place designated in this certificate, I hagent and agree to act in this capacity. I further agree to compelating to the proper and complete performance of my duties, obligations of my position as registered agent as provided for | ereby accept the appointment as registered ply with the provisions of all statutes and I am familiar with and accept the |

Filing Fee for Application

Certified Copy (optional)

Designation of Registered Agent

Certificate of Status (optional)

\$ 100.00

\$ 25.00 \$ 30.00

5.00

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ENCORE HOUSING OPPORTUNITY FUND

INVESTMENT MANAGER, 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

FIRST DAY OF APRIL, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ENCORE HOUSING OPPORTUNITY FUND INVESTMENT MANAGER, LLC" WAS FORMED ON THE THIRTIETH DAY OF MARCH, A.D. 2010.

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

4806079 8300

100345768

AUTHENT\(CATION: 7907995

DATE: 04-01-10

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