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EXAMINER



ACCOUNT NO. : I2000000195 REFERENCE : 422242 4983A AUTHORIZATION : COST LIMIT ORDER DATE: June 21, 2010 ORDER TIME : 12:58 PM ORDER NO. : 422242-010 CUSTOMER NO: 4983A FOREIGN FILINGS NAME: FRONTIER OCALA LLC XXXX QUALIFICATION (TYPE: <u>LL</u>) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN STAMPED COPY \_\_\_ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Carina L. Dunlap -- EXT# 2951

EXAMINER:

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

| LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN T   | UTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIG<br>HE STATE OF FLORIDA:   |
|---|---|
| 1. Frontier Ocala LLC (Name of Foreign Limited Liability Company; must in   | clude "Limited Liability Company," "L.L.C.," or "LLC.")   |
| (If name unavailable, enter alternate name adopted for the pur<br>consent of the managers or managing members adopting the a<br>Company," "L.L.C.," "LLC.")   | pose of transacting business in Florida and attach a copy of the writte<br>liternate name. The alternate name must include "Limited Liability |
| 2 Delaware  | To be applied for.  |
| (Jurisdiction under the law of which foreign limited liability company is organized)  | y (FEI number, if applicable)   |
| 4. (Date of Organization)   | 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")  |
| 6. Upon filing  |   |
| (Date first transacted business in l<br>(See sections 608.501 & 608.502 F   | Florida, if prior to registration.) S. to determine penalty liability)  |
| 7. 1801 SW 3rd Avenue, Suite 500  | ~   |
| Miami, FL 33129   |   |
| (Street Addres  | ss of Principal Office)   |
| 8. If limited liability company is a manager-manage   | d company, check here 🛛   |
| 9. The name and usual business addresses of the ma  | maging members or managers are as follows:  |
| Gordon South LLC  |   |
| c/o Eric Gordon   |   |
| 1801 SW 3rd Avenue, Suite 500, Miami,   | FL 33129  |
| 10. Attached is an original certificate of existence, no more than 90 the jurisdiction under the law of which it is organized. (A photocoranslation of the certificate under outh of the translator must be sul |   |
| 1. Nature of business or purposes to be conducted of  | or promoted in Florida: To acquire, own,  |
| develop, construct and manage real estate.  |   |
|   |   |
| (In accordance with section 608.408(3),   | uthorized representative of a member.  F.S., the execution of this document constitutes giny that the facts stated herein are true.)  Ordon   |

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.

|                                    | ne of the Limited Liability Co<br>Ocala LLC | mpany is:                                  |  |
|------------------------------------|---|--|--|
| If name un                         | available, the alternate name to            | o be used in the state of Florida is:      |  |
| 2. The nar                         | ne and the Florida street addre             | ss of the registered agent and office are: |  |
| Corporation Service Company (Name) |   |  |  |
|                                    | 1201 Hays Street                            | Address (P.O. Box NOT ACCEPTABLE)          |  |
|                                    | Tallahassee                                 | FL 32301                                   |  |
|                                    |   | City/State/Zip                             |  |

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.

Corporation Service Company

BY: Carina L. Dunlap

Asst. Vice President

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

## Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "FRONTIER OCALA 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 TWENTY-FIRST DAY OF JUNE, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FRONTIER OCALA LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF JUNE, A.D. 2010.

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

4838651 8300

100673704

AUTHENTS CATION: 8065530

DATE: 06-21-10

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