Division of Corporations Electronic Filing Cover Sheet

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(((H10000212052 3)))



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To:

Division of Corporations

Fax Number : (850) 517-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Phone

Fax Number : (850)878-5368

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

Page 17	Address:			

Foreign Limited Liability Company Jacksonville Leased Housing Associates I, LLC

	 <del></del>
Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

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Help

N. Culligan SEF 2 8 2010 9/27/2010

### **COVER LETTER**

TO: New Filing Section Division of Corporati	Ong		
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SUBJECT: Jucksonville Lea		on - must include suffix	•
	rame of corporation	on - must include surrix	
Dear Sir or Madam:			
The enclosed "Application by "Certificate of Existence," or above referenced foreign corp	"Certificate of Good Sta	anding" and check are sub	
Please return all corresponder	ce concerning this matt	er to the following:	
Steven Shaw			
,	Name o	f Person	
Jacksonville Leased Housing As	sociates I, LLC		
	Firm/Co	mpany	
2905 Northwest Blvd., Suite 150	)		
	·	Iress	
Plymouth, MN - 55441			
	City/State	and Zip code	
ashaw@dominiuminc.com	·		
	nail address: (to be use	for future annual report	notification)
For further information conce	rning this matter, please	call:	
Steven Shaw	at ( <sup>763</sup>	354-5612	
Name of Person		Code & Daytime Teleph	none Number
		•	
STREET/COURTER New Filing Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230 Enclosed is a check for the fol	ons or Circle	MAILING A New Filing So Division of C P.O. Box 632 Tallahassee, I	ection orporations 7
□ \$70.00 Filing Fee □ \$		S78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 608508, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Jacksonville Leased Housing Associates I, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter atternate 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 came. The alternate came must include "Limited Liability Company," "L.L.C," "LLC.") 2. (Jurisdiction under the law of which foreign limited liability company is organized) 08/18/2010 (Duration: Year limited liability company will sease to exist or "perpetual") (Date of Organization) (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 7 2905 Northwest Boulevard, Suite 150 Plymouth, MN 55441 (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: David L. Brierton, Jack W. Safar, Armand E. Brachman, Paul R. Swoon, Jeffrey R. Huggott, Mark S. Moorhouse and Christopher P. Barnes, all located at: 2905 Northwest Boulevard, Suite 150, Plymouth, MN 55441. 10. Attached is an original contribute 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 this 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: To become a general partner in a gardnorship that owns low-income housing. Signature of a member of 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 penalties of perjury that the facts stated herein are true.) Paul R. Sween 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.

	Jacksonville Leased Housing Associates I, LLC	
f unavailable, the al	ternate to be used in the state of Florida is:	
	and the second s	
. The name and the	e Florida street address of the registered agent and office are:	10 SEP
	C T Corporation System	27
<del></del>	(Name)	79
	1200 South Pine Island Road	· ] 9
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Plantation FI 33324	
	City/Sunte/Zip	

agent and agree to act in this capacity. I further agree to comply with the provisions of a 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.

C T Corporation System Michele Miller <del>Assista</del>nt Secretary (Signature)

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

Certificate of Status (optional) 5.00

# State of Minnesota

## **SECRETARY OF STATE**

#### Certificate of Good Standing

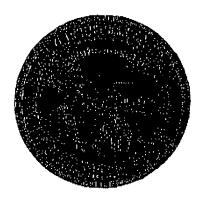
I, Mark Ritchie, Secretary of State of Minnesota, do certify that: The limited liability company listed below is a limited liability company formed or registered to do business under the laws of Minnesota; the limited liability company was formed by the filing of articles of organization or registered to do business by filing an application for a certificate of authority with the Office of the Secretary of State on the date listed below; the limited liability company is governed by Chapter 322B of Minnesota Statutes; and this limited liability company is authorized to do business as a limited liability company at the time this certificate is issued.

Name: Jacksonville Leased Housing Associates I, LLC

Date Formed or Registered: August 19, 2010

State of Organization: Minnesota

This certificate has been issued on September 24, 2010.



Mark Ritchie Secretary of State.