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### Foreign Limited Liability Company LNR Rolling Ridge, LLC

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

J. SAULSBERRY EXAMINER

#### COVER LETTER

| SUBJECT:                          |  | LNR Rolling Ridge, LLC   |   |     |
|-----------------------------------|--|--|---|-----|
|                                   |  | Name of Limited Liability Company  |   |     |
| The enclosed "Applicati           | on by Foreign Limited                  | Liability Company for Authorization to Transa                              | act Business in Florids," Certificate o | of  |
| Existence, and check are          | submitted to register                  | the above referenced foreign limited liability ec                          | empany to transact business in Florid   | 2   |
| Please return all correspo        | ondence concerning th                  | is matter to the following:  |   |     |
|                                   |  | Madelyn Ocasia   |   |     |
|                                   | ***                                    | Name of Person   |   |     |
|                                   |  | LNR Property LLC   |   |     |
|                                   |  | Firm/Company   |   |     |
|                                   |  | 1601 Washington Ave., Suite 800  | · · · · · · · · · · · · · · · · · · ·   |     |
|                                   |  | Address  |   |     |
|                                   |  | Miami Beach, FL 33139  | 77.20                                   |     |
|                                   | ************************************** | City/State and Zip Code  |   |     |
|                                   |  | ·  | SCORETARY -3                            |     |
|                                   |  | Mocasio@Inrproperty.com ss: (to be used for future annual report notificat |   | *** |
|                                   | c-mail addic                           | 22: (to be used for future annual report notition                          | 77° C                                   | 7   |
| or further information c          | oncerning this matter,                 | please call:   | A A                                     | 11  |
|                                   |  |  | 8F &                                    | C   |
|                                   | Madelyn Ocasio                         | nt ( 305 )   | 03343103 CO                             |     |
|                                   | Name of Person                         | Area Code & Daytime Telephone Nur  | nber 🗜 10                               |     |
| MAILING ADI                       |  | STREET ADDRESS:  |   |     |
| Division of Corp                  |  | Division of Corporations   |   |     |
| Registration Sec<br>P.O. Box 6327 | מסח                                    | Registration Section   |   |     |
| Tallehassec, FL:                  | 32314                                  | Clifton Building 2661 Executive Center Circle                              |   |     |
|                                   |  | Tallahassee, FL 32301  |   |     |
| nclosed is a check fo             | or the following arr                   | agunt:   |   |     |
|                                   | ū                                      |  |   |     |
| <b>\$125.00</b> Filing            | Fee \$130.00 F                         | iling Fee & S155.00 Filing Fee & S   | 160,00 Filing Fee, Certificate          |     |

## 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: LNR Rolling Ridge, LLC (Name of Poreign Limited 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.") Celifornia (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) October 12, 2010 (Date of Organization) (Duration: Year limited liability company will cease to exist or "perputual") (Date first transacted business in Florida, if prior to registration.) (See acctions 608.501 & 608.502 F.S. to determine ponalty liability) 7 1601 Washington Ave., Suite 800 Miami Beach, FL 33139 (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: Leisure Colony Management LLC 1601 Washington Ave., Suite 800 Miami Beach, FL 33139 10. Attached is an oxiginal 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 oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida;

Signature of a member or an authorized representative of a member. (In accordance with action 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.)

Iamos A. Whitlow

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.

|   | LNR  | Rolling Ridge, LLC  |  |
|---|--|---|--|
| If unavailable, the   | ilternate to be used in th   | e state of Florida is:  |  |
| 2. The name and th  | e Florida street address   | of the registered agent and office are:   |  |
|   | Cĭ   | Corporation System  | 010 NOV -3<br>SEGRÉTARY<br>ALLAHASSE                       |
| <u>.                                    </u>  |  | (Name)  | NO WELL  |
|   |  | South Pinc Island Road  | rij  |
|   | Florida Street Add   | ress (P.O. Box NOT ACCEPTABLE)  | AH<br>FSI<br>FL  |
| ·   | Plantation   | FL 33324  | 8: 32  |
|   |  | City/State/Zip  | _ > 10   |
| liability company at agent and agree to a relating to the proper obligations of my posterior.  By:  CT Corporations | the place designated in the city in this capacity. I furth rand complete performan | o accept service of process for the abovits certificate, I hereby accept the appointer agree to comply with the provisions nee of my duties, and I am familiar with as provided for in Chapter 608, Florida | intment as registered<br>of all statutes<br>and accept the |

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

# State of California Secretary of State

#### CERTIFICATE OF STATUS

ENTITY NAME: LNR ROLLING RIDGE, LLC

FILE NUMBER:

201028610012

FORMATION DATE:

10/12/2010

TYPE:
JURISDICTION:

DOMESTIC LIMITED LIABILITY COMPANY

**CALIFORNIA** 

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, righter privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.

HE OF

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of October 28, 2010.

DEBRA BOWEN
Secretary of State

MMS 63P (% 1973)