

## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Account Number : 076077000521 Phone : (954)527-2428

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## Foreign Limited Liability Company

ELCO LANDMARK at SAVOY SQUARE MANAGEMENT, LLC

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**EXAMINER** 

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### **COVER LETTER**

	egistration Section dvision of Corporations		
gilatem	. Elco Landmark at S	avoy Square Management, LLC	
BUDGECI		Name of Limited Liability Company	<del></del>
The enclos Existence,	ed "Application by Foreign Limited and check are submitted to register t	Liability Company for Authorization to Transact Busines he above referenced foreign limited liability company to t	s in Florida," Certificate of transact business in Florida.
Picase retu	rn all correspondence concerning thi	s matter to the following:	
	Anne Sallee		
		Name of Person	
	Ruden McCloskey, PA		
		Firm/Company	<del></del>
	P O Box 1900		
		Address	
	Fort Lauderdale, FL 3	3302	
		City/State and Zip Code	<del></del>
	anne.sailee@ruder	n.com	
		ss: (to be used for future annual report notification)	
For further	information concerning this matter,	picase cali:	TALI
A	nne Sallee	<sub>at (</sub> 954 <sub>)</sub> 527-2428	AHAA
	Name of Person	Area Code & Daytime Telephons Number	SA I
Di	AILING ADDRESS: vision of Corporations gistration Section	STREET ADDRESS: Division of Corporations Registration Section	FACTOR AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON ADDRE
P.	O. Box 6327 Hahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	TH 8: 28 IF STATE FLORIDA
	is a check for the following an 25.00 Filing Fee 5130.00 Filin Certificate of	g Fee & \$155.00 Filing Fee & \$160.00 Filing F	

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### 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 FOREKEN

neent of the managers or managing members adopting the empany," "L.L.C," "LLC.")	re niteri	o of transauting business in Florids and attach a copy of the name. The alternate name must include "Limited Liabi	
Delaware Jurisdiction under the law of which foreign limited liab	3.	27-4664169 (FBI number, if applicable)	•
company is organized)	•		
12/21/2010	5.	perpetual	
(Date of Organization)		(Dirration: Year limited liability company will cease to exist or "perpetual")	
Upon qualification			
(Date first transacted business (See sections 608.501 & 608.50	in Flor 2 F.S. 1	ids, if prior to registration.) to determine penalty finishiny)	•
825 Parkway Street, Ste 4,			•
Jupiter, FL 33477		TAL	
	dress o	(Principal Office)	<u> </u>
If limited liability company is a manager-mana	aged c	company, check here	I - 83.
The name and usual business addresses of the	mana	ging members or managers are as follows: 📆 💆	<u> </u>
Elco Lendmark Residential Holdings, LL	.C	FLC	<u>-</u> 2€
825 Parkway Street, Ste 4,		RIDA	: 28
Jupiter, FL 33477			
	bcopy	ys old, duly authersicated by the official having custody office is not acceptable. If the certificate is in a <i>foreign language</i> , a sted.)	ords in
Nature of business or purposes to be conducte	g nor be	promoted in Florida: Investment	
			•

Joseph G, Lubeck, Authorized Representative Typed or printed name of signee

THUULUU MOTHT J

# Delaware

PAGE 1

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "ELCO LANDMARK AT SAVOY SQUARE MANAGEMENT, LLC", FILED IN THIS OFFICE ON THE TWENTY-FIRST DAY OF DECEMBER, A.D. 2010, AT 3:29 O'CLOCK P.M.

11 FEB - 1 AM 8: 28
SECHELARY OF STATE

4916611 8100

101218065

You may varify this partificate online at our delaware. gov/authvar. shini

AUTHENTICATION: 8465030

DATE: 12-31-10

H100000268443

State of Delevare Secretary of State Division of Corporations militared 04:32 PM 12/21/2010 FILED 03:29 PM 12/21/2010 RV 101218065 - 4916611 FILE

#### CERTIFICATE OF FORMATION

OF

### ELCO LANDMARK AT SAVOY SQUARE MANAGEMENT, LLC

- 1. The name of the limited liability company is Blco Landmark at Savoy Square Management, LLC.
- 2. The address of its registered office in the State of Delaware is, c/o The Corporation Trust Company, Corporation Trust Center, 1209 Orange Street, in the City of Wilmington, Delaware 19801, County of New Castle. The name of its registered agent at such address is The Corporation Trust Company.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Formation of Elco Landmark at Savoy Square Management, LLC this 21st day of December, 2016.

(s/ Joseph G. Lubeck
Joseph G. Lubeck, Authorized Person

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## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 of 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.

If unavail	lable, the alternate to be used in the state of Florida is:			
2. The na	ame and the Florida street address of the registered agent and of	SECRE	11 FEB	12 12 12 12 12 12 12 12 12 12 12 12 12 1
	CT Corporation System	\$	٠ ١	CONTRACTO
	(Name)	SHI		
	1200 South Pine Island Road		် ထဲ	Same?
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	LORIDA	28	
	Plantation FL 33324 Chy/State/Zip			
dability co agent and relating to		the appointment as regis rovisions of all statutes Giar with and accept the	stered	
dability co agent and relating to	Chy/State/Zip  sen named as registered agent and to accept service of process for ompany at the place designated in this certificate, I hereby accept to agree to act in this capacity. I further agree to comply with the proper and complete performance of my duties, and I am family of my position as registered agent as provided for in Chapter 60.  Madon	the appointment as regis rovisions of all statutes Giar with and accept the	stered	

Certificate of Status (optional)