Division of Corporations Electronic Filing Cover Sheet

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(((H11000066201 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

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Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023 Phone : (850)222-1092

Fax Number

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

Email	Address:			

Foreign Limited Liability Company Redfish Village Condos, LLC

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

T. HAMPTON MAR 1 5 2011



COYER LETTER

TO: Registration Section Division of Corporations	·
SUBJECT: Redfish Village Condos, LLC	
	ame of Limited Liability Company
The enclosed "Application by Foreign Limited Lia Existence, and check are submitted to register the	ibility Company for Authorization to Transact Business in Florida," Certificate of above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this m	natter to the following:
Paula McC	Name of Person
	Name of Person
	Firm/Company
665 SIMON	1s Rd
Williams Town	Address MA 0/2-6 7 City/State and Zip Code
В-mail address: (to be used for future annual report notification)
For further information concerning this matter, plea	se call:
	at () Area Code & Daytime Telephone Number
Name of Person	Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahasses, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amou \$125.00 Filing Fee \$130.00 Filing Fe Certificate of State	ee & []\$155.00 Filing Fee & []\$160.00 Filing Fee, Certificate

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

IN COMPLIANCE WITH SECTION (08:50), FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FUNDAY.

	ABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Village Condos, LUC
(Nan	ne of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
nonsent of th	available, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the he managers or managing members adopting the alternate name. The alternate name must include "Limited Liabil" ("L.L.C." "LLC.")
Delaware	ion wisder the law of which foreign limited liability (FEI number, if applicable)
Company i	is organized)
March	11,2011 5 Persotual
•	(Date of Organization) 5. Ferpetual (Duration: Year Ilmited liability company will coase to exist or "perpetual")
	Upon Qualification
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty imbility)
	665 SiMONDS RD
•	Williams town, Ma 01267
	(Street Address of Principal Office)
The nam	ne and usual business addresses of the managing members or managers are as follows: LFC Projects UC Single Member
	PFC Projects LLC Single Member 645 SimonDs RD
	Williamstown, Ma. 01267
jurisdiction	s an original certificate of sxistence, no more than 90 days old, duly swinersicated by the official having custody of recon curder the law of which it is organized. (A photocopy is not ecceptable. If the certificate is in a foreign language, a be certificate under eath of the translator must be submitted.)
. Nature o	of business or purposes to be conducted or promoted in Florida:
	Purchase and Sale of Real Estate
	Michell Mariero
	Signature of a member or 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in a.817.155, F.S.)
	Michelk Manners
	Typed or printed name of signee

HAR IL AH

SECRETARY OF STATE IVISION OF CORPORATION

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.

	of the Limited Liability Comp e Conods, LLC	ally is.		
If unavailabl	c, the alternate to be used in the	e state of Plorida is:		
2. The name	and the Florida street address	of the registered agent and office ar	e:	
	C T Corporation System	(Name)		
	1200 South Pine Island Road	(IVALUE)		
		ress (P.O. Box NOT ACCEPTABLE)		
	Plantation	FL 33324 City/State/Zip		
liability comp agent and agr relating to the	any at the place designated in the ree to act in this cupacity. I furth proper and complete performa	feeta Des	pointment as registered ns of all statutes ith and accept the	HAY FIETAERY
	\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Designation of Registered Agent Certified Copy (optional) Certificate of Status (optional)	11 MAR 14	SECRETARY OF COR

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "REDFISH VILLAGE CONDOS, 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 FOURTEENTH DAY OF MARCH, A.D. 2011.

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

110288711

You may werify this contificate online at corp. delaware. gov/authver. shtml

DATE: 03-14-11