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EXAMINER



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REFERENCE :

983969

4304851

AUTHORIZATION,

COST LIMIT

File First

ORDER DATE: November 17, 2011

ORDER TIME : 11:23 AM

ORDER NO. : 983969-005

CUSTOMER NO:

4304851

#### FOREIGN FILINGS

NAME:

LANDMARK AT WOODLAND TRACE GP

LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stephanie Milnes -- EXT# 2920

EXAMINER:

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE S	
Landmark at Woodland Trace GP LLC	e "Limited Liability Company" "LC" or "LLC"
(Name of Foreign Limited Liability Company; must includ	e "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company," "L.L.C," "LLC.")	
2. Delaware 3.	N/A
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. November 14, 2011 5.	perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. (Date first transacted business in Flor	ida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. t	
7. c/o Landmark Residential, 825 Parkway St., Suite 4,	Juniper, FL 33477
(Street Address of	f Principal Office)
8. If limited liability company is a manager-managed c	ompany, check here 🔀
9. The name and usual business addresses of the manag	ging members or managers are as follows:
Elco GP OPT I LLC, c/o Landmark Residential, 82	5 Parkway St., Suite 4, Juniper, FL 33477
10. Attached is an original certificate of existence, no more than 90 days the jurisdiction under the law of which it is organized. (A photocopy is translation of the certificate under oath of the translator must be submit	is not acceptable. If the certificate is in a foreign language, a tted.)
11. Nature of business or purposes to be conducted or p	promoted in Florida: to acquire and own a
general partnership interest in and act as general part	
(see attached signature pag	ge)
Signature of a member or an auth	orized representative of a member.
	ion of this document constitutes an affirmation under the I am aware that any false information submitted in a third degree felony as provided for in s.817.155, F.S.)
. Typed or printed n	name of signee

#### Application by Foreign Limited Liability Company To Transact Business in Florida

Landmark at Woodland Trace GP LLC Signature Page

> Elco GP OPT I LLC, a Delaware limited liability company, its manager

By: Elco Landmark Residential Holdings LLC, A Delaware limited liability company, its managing member

> By: JLCo, LLC, a Florida limited liability company

> > By:

Name: Joseph Lubeck Title: Manager

## 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.

1. The name of the Li	mited Liability Comp	pany is:	
LANDMARK AT W	OODLAND TRACE	GP LLC	<u></u>
If unavailable, the alte	rnate to be used in the	e state of Florida is:	
2. The name and the l	Florida street address	of the registered agent and office are:	
Corpo	ration Service Compa		
<del></del>		(Name)	
1201 £	Hays Street		
	Florida Street Add	dress (P.O. Box NOT ACCEPTABLE)	
Talla	hassee	FL 32301 City/State/Zip	
		Спулмае/Др	
liability company at the agent and agree to act relating to the proper a obligations of my positi	e place designated in th in this capacity. I furt and complete performa	to accept service of process for the above stated limithis certificate, I hereby accept the appointment as rether agree to comply with the provisions of all statute ance of my duties, and I am familiar with and accept as provided for in Chapter 608, Florida Statutes.	egistered es
Ву:	- Stephanie M	Yulnez Stephanie K. Milnes  Assistant Vice President	
	\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Designation of Registered Agent	

# Delaware

DACE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "LANDMARK AT WOODLAND TRACE GP 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 SEVENTEENTH DAY OF NOVEMBER, A.D.

2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LANDMARK AT WOODLAND TRACE GP LLC" WAS FORMED ON THE FOURTEENTH DAY OF NOVEMBER, A.D. 2011.

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

5065049 8300

111206423

Jeffrey W Bullock, Secretary of State

AUTHENT (CATION: 9163819

DATE: 11-17-11

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