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RECEIVED 1 DEC 16 AM 9: 37 EURIARY, OF STATE ELAHASSFE, FLORIA

Foreign Limited Liability Company SUNSET PALMS CONDOMINIUMS, LLC

Certificate of Status	0
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Page Count	04
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C. LEWIS

DEC 1 9 2011

EXAMINER

COVER LETTER

SUBJECT:	Sunset Palms Condominiums, LL		
		Name of Limited Liability Company	•
The enclosed Existence, ar	"Application by Foreign Limited defect are submitted to register t	Liability Company for Authorization to Transact Business in the above referenced foreign limited liability company to trans	n Florida," Certificate of sact business in Florida
Please return	all correspondence concerning thi	is matter to the following:	
	Paula A. McCarthy		•
	,	Name of Person	
	Sunset Palms Condominiums,	LLC	
•		Firm/Company	
	665 Simonds Road		
		Address	
	Williamstown, MA 01267		
		City/State and Zip Code	•
	pmccarthy@inlandinc.com		
	E-mail addres	s: (to be used for future annual report notification)	,
For further Inf	formation concerning this matter, p	nlease call:	
Paula	A. McCarthy	at (413) 458-5220	
	Name of Person	Area Code & Daytime Telephone Number	'
	LING ADDRESS: ion of Corporations	STREET ADDRESS: Division of Corporations	
Regis	tration Section	Registration Section	
	Box 6327 nassce, FL 32314	Clifton Bulkling 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is	a check for the following am	Tallahasaee, FL 32301	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA IN COMPLENCE WITH SECTION GREAT FLORIDA STATUTES THE POLLOWING IS SUBMITTED TO RECEIVE A BORDEN

	LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. Stunget Painta Condominiums, LLC	
1,	(Name of Foreign Limited Liability Company; must include "Limited Liability Company,"	"LL.C.," or "LLC.")
ÇO	(If name unavailable, enter alternate name adopted for the purpose of transacting business in Plori content of the managers or managing members adopting the alternate name. The alternate name in Company," "L.L.C," "L.L.C.")	
2.	2. Delaware 3.	
_	(FEI number, if company is organized)	applicable)
4.	4. December 12., 2011 5. Perpetual	<u></u>
	(Date of Organization) (Duration: Year limited liabil exist or "perpetual")	ity company will coase to
б.	6	
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7.	7. 665 Simonds Road, Williamstown, MA 01267	
	(Street Address of Principal Office)	
8.	8. If limited liability company is a manager-managed company, check here	
9.	9. The name and usual business addresses of the managing members or managers	are as follows:
	PPC Projects, LLC (Manager), 665 Simonds Road, Williamstown, MA 01267	
	The findent pro furnishmy one comment and the second secon	
		A 1 1 1 - C - 1 1
10.	10. Attached is an original certificate of existence, no more than 90 days old, duly authoriticated by the or the juristication under the law of which it is organized. (A photocopy is not acceptable. If the certificate is	ingai naving cualogy difeccios in sin a foreien languaga a
ina.	translation of the certificate under onth of the translator wast be submitted.)	
11.	11. Nature of business or purposes to be conducted or promoted in Florida:	clase ark
	Take of real Estate and are other bushed	Austreas
9 •;		
	Level Cle Mershy	
	Signature of a member or an authorized representative of a member or an authorized representative of a member or an authorized representative an a	
	(in accommon with moment one, avelul, r.s., the execution or this covering constitutes and penalties of perjuly that the facts stated have in a true I am aware that any false inform	ation stilmited in a
	document to the Department of State constitutes a third degree felony as provided	
	hus H Melacray	were the state of
	Typed or printed name of slaneo	

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.

Sunset Pain	ns Condominiums, LLC	,				
If unavaila	ible, the alternate to be use	ed in the state of Florida is:				
2. The name and the Florida street address of the registered agent and office are:						
	C T Corporation System		20 H			
	<u> </u>	(Name)	ZOHI DEC 16 SECRETAR TALLAHASS			
	1200 South Pine Island R	Road	707 -			
	Plorida St	reet Address (P.O. Box NOT ACCEPTABLE)	SEE. A			
	Plantation	FI 33324	S. S.			
		City/State/Zip	ATE DRIUD			
liability con agent and a relating to t	npany at the place designal gree to act in this capacity. he proper and complete pe	nt and to accept service of process for the a ted in this certificate, I hereby accept the a I further agree to comply with the provis rformance of my duties, and I am familiar d agent as provided for in Chapter 608, Fl	ippointment as registered tions of all statutes with and accept the			

Designation of Registered Agent

Certificate of Status (optional)

Certified Copy (optional)

25.00

5.00

\$ 30.00

Delaware

PAGE I

The First State

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

DELAWARE, DO HEREBY CERTIFY "SUNSET PALMS CONDOMINIUMS, 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 FIFTEENTH DAY OF DECEMBER, A.D.

2011.

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

5078888 8300

111298415

AUTHENTICATION: 9232084

DATE: 12-15-11

You may verify this cartificate online of corp. delaware. gov/authver. Shtml