Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LRA ADMINISTRATOR, LLC

Account Number : 120080000036 ; (386)246-5859 Phone Fax Number : (386) 246-5856

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

Foreign Limited Liability Company LRA Northshore Hammock, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

B. KOHR

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Corporate Filing Menu

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COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	
	Name of Limited Liability Company
	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Cer ce, and check are submitted to register the above referenced foreign limited liability company to transact business
Please r	return all correspondence concerning this matter to the following:
	Tammy Hotaling
	Name of Person
	H&R Resorts, LLC - Legal Department
	Firm/Company
•	200 Ocean Crest Drive, Suite 31
	Address
	Palm Coast, FL 32137
	City/State and Zip Code
	thotaling@hammockbeach.com
	E-mail address: (to be used for future annual report notification)
For furt	ther information concerning this matter, please call:
	Tammy Hotaling at (386) 246-5859
	Name of Person Area Code & Daytime Telephone Number
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
	sed is a check for the following amount: \$125.00 Filing Fee \(\text{S130.00 Filing Fee & Certificate of Status} \) \$125.00 Filing Fee \(\text{Certified Copy} \) \$160.00 Filing Fee, Certificate of Status \(\text{Certified Copy} \)

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:

1. LRA Northshore Hammock, LL	
(Name of Foreign Limited Liability Cor	npany; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adoptions of the managers or managing members Company," "L.L.C," "LLC.")	oted for the purpose of transacting business in Florida and attach a copy of the writte adopting the alternate name. The alternate name must include "Limited Liability
2. Georgia (Jurisdiction under the law of which foreign	3. 59-3536405 limited liability (FEI number, if applicable)
company is organized)	n a madural
4. November 11, 2010 (Date of Organization)	5. perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6. (Date first transact	ted business in Florida, If prior to registration.)
(See sections 608.56) 7. 200 Ocean Crest Drive, Suite	01 & 608.502 F.S. to determine penalty liability)
7. 200 Ocean Clest Drive, Guid	3 0 1, 1 ann Oddat, 1 L 02 101
	(Street Address of Principal Office)
8. If limited liability company is a mar	nager-managed company, check here 🗸
9. The name and usual business address	sses of the managing members or managers are as follows:
Legacy Resort Assets, LLC, a	Delaware limited liability company
171 17th Street, Suite 1575	
Atlanta, GA 30363	
10. Attached is an original certificate of existence the jurisdiction under the law of which it is organ translation of the exitificate under oath of the tran	e, no more than 90 days old, duly authenticated by the official having custody of records in sized. (A photocopy is not acceptable. If the certificate is in a foreign language, a slator must be submitted.)
11. Nature of business or purposes to b	pe conducted or promoted in Florida: any and all lawful
	ited by profit LLC's under the laws of the State of Florida
By: U	rt Assets, LLC, a Delaware LLC, its Manager
_	comber or an authorized representative of a member.
(In accordance with section 608.4) penalties of perjury that the facts	08(3), F.S., the execution of this document constitutes an affirmation under the stated herein are true. I am aware that any false information submitted in a

Amy Wilde, VP of Legacy Resort Assets, LLC, a DE LLC
Typed or printed name of signee

document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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 Limited Liability Company is:
LRA Northshore Hammock, LLC
If unavailable, the alternate to be used in the state of Florida is:
2. The name and the Florida street address of the registered agent and office are:
Virginia Tee, Esq.
(Name)
200 Ocean Crest Drive, Suite 31 Florida Street Address (P.O. Box NOT ACCEPTABLE)
Palm Coast, FL FL 32137 City/State/Zip
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes. (Signature)
\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent
 \$ 30.00 Certified Copy (optional)
 \$ 5.00 Certificate of Status (optional)

Control No. 10079833

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Drive Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

LRA NORTHSHORE HAMMOCK, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 11/15/2010 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 5th day of January, 2012

B: 1.h-

Brian P. Kemp Secretary of State

Certification Number: 7905635-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp