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Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

; (850)222-1092

Fax Number

: (850)878~5368

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

T-a-il	Address:			

Foreign Limited Liability Company Apartments at Lakeside Member, LLC

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

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Corporate Filing Menu

Help

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CT CORPORATION

COVER LETTER

	Registration Section Division of Corporations	•		
SUBJEC	Cr. Apartments at Lakeside Member, LL	LC		
505020		ame of Limited Limbility Company		
		ability Company for Authorization to Transact Business in Florida," C above referenced foreign limited liability company to transact business		
Ptcase re	eturn all correspondence concerning this n	matter to the following:		
	Lynn Donohue			
		Name of Person		
	JDF, LLC		,	
		Firm/Company		
	340 Pemberwick Road			
		Address		
	Greenwich, CT 06831			
		City/State and Zip Code		
	donohuel@jdflaw.com			
	E-mail address:	(to be used for future annual report notification)		
For furth	er information concerning this matter, ple	ease call:		
:	Lynn Dozoliue	at (203) 869-0900		
	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, PL 32301		
Enclose	ed is a check for the following amo \$125.00 Filing Fee \$130.00 Filing I Certificate of St	Fee & S155.00 Filing Fee & S160.00 Filing Fee. Certificate		

FLUS7 - 1945/2010 C 1 System Dalme

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT RESIDENS. INTHE STATE OF FLORIDA.

	WHILED CLAREST TO COMPANY TO TRANSACT BOSINESS IN THE STATE OF PLORIDA;		
1.	Apartments at Lakeside Member, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	_	
	(wante of Poteign Limited Lizability Company; must include "Limited Lizability Company," "L.L.C.," or "LLC.")		
71	f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of t	-	
CO	onsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Lia	ne written bility	
	ompany," "L.L.C," "LLC.")	,	
2	Delaware 3,		
	(Jurisdiction under the law of which foreign limited liability (FEY number, if applicable) company is organized)		
4	February 6, 2012 5 Perpotual		
•••	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	0	
б.			
٠.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 P.S. to determine penalty liability)	⊤ະ	
		33	
7.	477 South Rosemary Avenue, Suite 301	_ 2	77
	West Palm Beach, FL 33401	-8 AK	FILED
	(Street Address of Principal Office)	5 22	1
_	——————————————————————————————————————	7) JK	
8.	If limited liability company is a manager-managed company, check here	بب ج ج	
9.	. The name and usual business addresses of the managing members or managers are as follows:	1 00	
	Kristin M. Miller		
	340 Pernberwick Road		
	Greenwich, CT 06831		
10). Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of	merconde in	
	e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a		
	anslation of the certificate under oath of the translator must be submitted.)		
11	1. Nature of business or purposes to be gooducted or promoted in Florida: Real Estate		
	. [All] All A		
		 ·	
	\\ \ \ \\\\\\\		
	Signature of a mainter 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 s.817.155, F.S.) Kristin M. Miller, Manager		
	Typed or printed name of signee		
	t Aben of bittiten name of signed		

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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 C	ompany is:	
Apartments at Lakeside Member, LLC	· · · · · · · · · · · · · · · · · · ·	·
If unavailable, the alternate to be used in	n the state of Florida is:	
2. The name and the Florida street addr	ess of the registered agent and office are	:
The Richman Group of Flori		12 F
,	(Name)	200 日
477 South Rosemary Avenue	s, Suite 301	SSE & LE
Florida Street	mg Z c	
West Palm Beach	FL 33401	8: 4.5 STATI LORRI
	City/State/Zip	DA:
	•	

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.

By: (Signature) Gma k. Durlge, Severlary

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

FL057 - (WWX301) CT System Online

Delaware

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The First State

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

DELAWARE, DO HEREBY CERTIFY "APARTMENTS AT LAKESIDE MEMBER, 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 EIGHTH DAY OF FEBRUARY, A.D. 2012.

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

5104778 8300

120137677

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

AUTHENTY CATION: 9350126

DATE: 02-08-12

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