Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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## Foreign Limited Liability Company Broadstone Cypress Hammocks Alliance, LLC

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Electronic Filing Menu

Corporate Filing Menu

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March 15, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: BROADSTONE CYPRESS HAMMOCKS ALLIANCE, LLC

REF: W12000014826

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any further questions concerning your document, please call (850) 245-6051.

Carolyn Lewis Regulatory Specialist II Registration/Qualification Section

FAX Aud. #: E12000067523 Letter Number: 812A00009367

P.O BOX 6327 - Tallahassee, Florida 32314

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## **COVER LETTER**

|   | on Section<br>of Corporations  |   |  |                               |
|---|--|---|--|-------------------------------|
| SUBJECT: Broa                           | dstone Cypress Hammocks Allian   | ce, LLC   |  |                               |
|   | Nan  | ne of Limited Liability Compar  | у  |                               |
| The enclosed "App<br>Existence, and che | olication by Poreign Limited Liabi<br>ck are submitted to register the ab                    | ility Company for Authorization<br>ove referenced foreign limited   | n to Transact Business in Florida,"<br>liability company to transact busin | Certificate of ess in Plorida |
| Please return all or                    | crespondence concorning this ma  | tter to the following:  |  |                               |
| (                                       | Catherine Goodrich   |   |  |                               |
|   |  | Name of Person  |  |                               |
| A                                       | illiance Residential Company   |   |  |                               |
|   |  | Firm/Company  |  |                               |
| 2                                       | 415 E. Camelback Rd, Ste 600   |   |  |                               |
| _                                       | TID D. CALIFOLDECK MA, DIO COO   | Address   |  |                               |
|   |  |   |  |                               |
| <u> </u>                                | hoenix, AZ 85016   |   |  |                               |
|   |  | City/State and Zip Code   |  |                               |
| CE                                      | oodrich@allresco.com   |   |  |                               |
|   | E-mail address: (to  | be used for future annual repo  | ert notification)  |                               |
| For further informs                     | tion concerning this matter, pleas   | t call:   |  |                               |
| Catherine                               | Goodrich   | et ( 602 ) 7  | 78-2800  |                               |
|   | Name of Person   | Area Code & Daytime Tel   | ophone Number  |                               |
| Division o<br>Registration<br>P.O. Box  |  | STREET ADDRESS:<br>Division of Corporations<br>Registration Section<br>Clifton Building<br>2661 Executive Center Circle |  |                               |
| Enclosed is a ch                        | eck for the following amoun<br>ling Fee \$\int\S130.00\text{ Filing Fee}Cartificate of Stand | & [75155.00 Filing Pec &  | of Status & Certified Copy   |                               |

FL857 - 10/06/2010 C T System Online

## FILED

12 MAR 14 AM 8: 42

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO F STATE TRANSACT BUSINESS IN FLORIDA TALLAHASSEE, FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1 Broadstone Cypress Hammocks Alliance, LLC   |
|---|
| (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")  |
| (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the we consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")  2. Delaware   |
| (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)  |
| 4. March 7, 2012  (Date of Organization)  5. perpetual  (Duration: Year limited liability company will cease to exist or "perpetual")   |
| 6(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)  |
| 7. 2415 E. Camelback Rd, Ste 600, Phoenix, AZ 85016   |
| (Street Address of Principal Office)  8. If limited liability company is a manager-managed company, check here  |
| 9. The name and usual business addresses of the managing members or managers are as follows:  SEE ATTACHED.   |
| 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recont the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under each of the translator must be submitted.)  11. Nature of business or purposes to be conducted or promoted in Florida: |
| real estate development   |
| Signature of a member or an authorized representative of a member.  (In accordance with acction 608.408(3), P.S., the execution of this document constitutes an affirmation under the penaltics 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 follows as provided for in s.817.155, F.S.)  Patrick W. Dukes             |
| Typed or printed name of signee   |

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## 12 MAR 14 AM 8: 42

SEURETARY OF STATE TALLAHASSEE, FLORIDA ATTACHMENT TO APPLICATION FOR AUTHORIZATION

## BROADSTONE CYPRESS HAMMOCKS ALLIANCE, LLC

| Name of Member                | Address  |
|-------------------------------|--|
| Baker Street Holdings, L.L.C. | 2415 E. Camelback Rd., Suite 600<br>Phoenix, Arizona 85016     |
| Rippel Realty Holdings, Ltd.  | 5177 Richmond Ave, Ste 125<br>Houston, Texas 77056             |
| V. Jay Hiemenz                | 2415 E. Camelback Rd., Suite 600<br>Phoenix, Arizona 85016     |
| Robert M. Hutt                | 2415 E. Camelback Rd., Suite 600<br>Phoenix, Arizona 85016     |
| Michael Ging                  | 595 S. Federal Highway, Suite 600<br>Boca Raton, Florida 33441 |
| James M. Krohn                | 2415 E. Camelback Rd., Suite 600<br>Phoenix, Arizona 85016     |
| Patrick W. Dukes              | 355 NE Ford Street<br>McMinnville, Oregon 97128                |

### FILED

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

12 MAR 14 AM 8: 42

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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:                                   |         |
|-----------------------|-----------------------|---|---------|
| Broadstone Cypress Ha | mmocks Allianos, LL   | С   |         |
| If unavailable, the a | Itemate to be used    | in the state of Florida is:                   |         |
| 2. The name and th    | e Florida street add  | dress of the registered agent and office are: | <u></u> |
| CT                    | Corporation System    |   |         |
|                       |                       | (Name)  |         |
| 1200                  | South Pine Island Ros | ad  |         |
| <del>*</del>          | Florida Stree         | et Address (P.O. Box NOT ACCEPTABLE)          |         |
| Plan                  | ntation               | FL 33324                                      |         |
|                       |                       | 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)

(Signature)

Assistant Secretary

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

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# Delaware

PAGE 1

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "BROADSTONE CYPRESS HAMMOCKS
ALLIANCE, 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. 2012.

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

5120705 8300

120305557

You may verify this certificate online at corp.dalaware.gov/authver.shuml

AUTHENTY CATION: 9429468

DATE: 03-14-12

03/15/2012 09:54 8656336092 CT CORPORATION