

Division of Corporations Electronic Filing Cover Sheet

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(((H12000069031 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

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te of submission **Enter the email address for this business entity to annual report mailings. Enter only one email address please

Email Address:

Foreign Limited Liability Company Archstone Enclave Member LLC

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A. LUNT

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Corporate Filing Menu

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3/15/2012

2609889998 03/18/2012 10:14 March 16, 2012

FLORIDA DEPARTMENT OF STATE

Division of Corporations

MEMBER LLC

C T CORPORATE SYSTEM

SUBJECT: ARCHSTONE ENCLAVE MEMBER LLC

REF: W12000015245

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.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Agnes Lunt Regulatory Specialist II FAX Aud. #: E12000069031 Letter Number: 612A00009507

P.O BOX 6327 - Tallahassee, Florida 32314

03/16/2012 10:14 8656336092 CT CORPORATION

COVER LETTER

TO: Registration Section Division of Corporations	•
SUBJECT: Archetone Enclave Member LLC Name of Limited Liability Company	
The enclosed Application by Foreign Limited Liability Company for Authorization to Transa Existence, and check are submitted to register the above referenced foreign limited liability con	ct Business in Florida," Certificate of mpany to transact business in Florida.
Please return all correspondence concerning this matter to the following:	
Michael Shomo	
Name of Person	
c/o Atchstone	
Fitm/Company	
9200 E. Panorama Circle, Suite 400	201: FAL
A'ddress:	2012 MAR 1 5 SECRETARY ALLAHASSE
Englowood, CO 80112	
City/State and Zip Code	ma 🖚 🖼
avanderzwaag@archstonemail.com	
E-mail address: (to be used for future annual report notificat	ion) PA S
For further information concerning this matter, please call:	
Cynthia Mitchell-Dawson at (303) 708-5959	
Name of Person Area Code & Daythne Telephone Nu	mber
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building Tallahassee, FL 32301	
	00 Filing Fee, Certificate atus & Certified Copy

FL057 - 10/05/2010 C-1'Eyear Orline

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 LIABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA:

	Archstone Englave Member LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
Ċ	f name unavailable, eater alternate name adopted for the purpose of transacting business in Florida and attach a copy of the insent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabil ompany," "L.L.C." "LLC."	written ity
2.	Delaware 3.	
	(furisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4.	4/13/2011 5 Perpetual	
,-	(Date of Organization) (Duration: Year limited liability company will coase to exist or "perpetual")	
6.	רא איני איני איני איני איני איני איני אינ	26
ν.	(Date first transacted business in Florida, if prior to registration.) (See sections 608,501 & 608,502 F.S. to determine penalty liability)	IIZ MAR
7.	9200 E. Panorama Circle, Suite 400	20
	Englewood, CO 80112	15 F
	(Street Address of Principal Office)	
8,	If limited liability company is a manager-managed company, check here	1 9: 22
9.	The name and usual business addresses of the managing members or managers are as follows:	120
	Archstone New Development Holdings LP	
	9200 E. Panorama Circle, Suite 400	
	Englewood, CO 80112	
ibe	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of receiptrisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a relation of the certificate under outh of the translator must be submitted.)	endsin
u	. Nature of business or purposes to be conducted or promoted in Florida:	
	Apartment investment and sperations.	
	SVP of the man be	
	Signature of a member or an authorized representative of a member.	
	(In accordance with species 608,408(3), F.S., the execution of this document constitutes an affirmation under the	
	penulties 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.) Michael Shomo	
	Timed or printed name of clones	

F1.057 - JQ45/2010 C 7-System Oxides

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 I	Liability Comp	any is:		
Archsto	ne Enclave	Member L	rc		
If unavailable	e, the alternate to	o be used in the	state of Florida	is:	
2. The name	and the Florida	street address (of the registered	agent and office are:	
	C T Corporation	a System			
		· · · · · · · · · · · · · · · · · · ·	(Name)		
	1200 South Pine	e Island Road			
	Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	Plantation		FL 3332	4	
	<u> </u>		City/State/Zip		
ltability comp agent and age relating to the	any at the place ree to act in this (proper and com my position as r	designated in the capacity. I furth aplete performan	us certificate, I he her agree to comp nce of my duties, a as provided for it	f pracess for the above stated limited reby accept the appointment as registere by with the provisions of all statutes and I am familiar with and accept the Chapter 608, Florida Statutes.	
	' <u>В</u> у ,	Conie	Buy	Connie Bryan	
	**************************************	(Signa	mire) 🐧	Assistant Secretary	
		\$ 100.00	Filing Fee for:	Application Registered Agent	
		\$ 25,00 \$ 30,00			
		S 5.00		Status (optional)	

FLOST - 1005/2010 C T System Outline

Delaware

DXCD

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "ARCHSTONE ENCLAVE 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 NINETEENTH DAY OF MARCH, A.D. 2012.

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

4968447 8300

120325415

You may verify this certificate online at corp. delaware. gov/authour. show!

AUTHENTY CATION: 9439799

DATE: 03-19-12

MOTTHROUGHTON 13