Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053

Phone : (561)694-8107 Fax Number : (561)694-1639

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

Email Address:

l of 2

Foreign Limited Liability Company Lakes of Northdale Apartments LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

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 UABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Lakes of Northdale Apartments	LLC	
(Name of Foreign Lumited Liability Comp	LLC any; must include "Limited Liability Company," "L.E.C.," or "LLC.")	
(If name unavailable, enter alternate name adopte consent of the managers or managing members at Company," "L.L.C." "LLC.")	d for the purpose of transacting business in Florida and attach a copy of the w dopting the alternate name. The alternate name must include "Limited Liability	ritton Y
2. Delaware	3,	
(Junisdiction under the law of which toreign his company is organized)	nited liability (FEI number, if applicable)	
4. March 19, 2012	5 Perpetual	
(Date of Organization)	5. Perpetual (Duration: Year limited hability company will coase to exist or "perpetual")	•
6,	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	ָ ס
(Date first transacted (See sections 608.501	business in Florida, if prior to registration.) & 608,502 F.S. to determine penalty liability)	<u>-</u>
7. 120 Wells Avenue, Newton, M.	A 00.450	
		٠.
	Street Address of Principal Office)	
8. If limited liability company is a manag	ger-managed company, check here	
The name and usual business addresse	s of the managing members or managers are as follows:	
Steven Robbins - 120 Wells Aver	nue, Newton, MA 02459	
	omore than 90 days old, duly authenticated by the official having custody of recor	ds in
the jurisdiction runder the law of which it is organized translation of the certificate under outh of the translat	d. (A photocopy is not acceptable. If the certificate is in a fixeign language, a	
INTERMONT OF the CERTICALE AND COMPLOYING HANDS FOR	or massive suprimited.)	
11. Nature of business or purposes to be	conducted or promoted in Florida:	
ownership and operation of mu	Iti-family apartment community.	
Signature of a man	iber or an authorized representative of a member.	
	3), F.S., the execution of this document constitutes an affirmation under the	
penalties of perjury that the facts sta-	ted horein are mie. Vam aware that any false information submitted in a	
	tate constitutes a third degree felony as provided for in s.817,155, F.S.)	
	/, Authorized Representative	
Type	ed or printed name of signee	

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.

The name of the Limited Liability Company is: Lakes of Northdale Apartments 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:
CORPORATE CREATIONS NETWORK, INC.
(Name)
11380 PROSPERITY FARMS ROAD #221E
Florida Street Address (P.O. Box NOT ACCEPTABLE)
PALM BEACH GARDENS FL 33410
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.

Valerie Hawk-Donohue, Special Secretary

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

30.00 Certified Copy (optional)
5.00 Certificate of Status (optional)

SECRETARY OF SIMILAR DIVISION OF CORPORATIONS

Delaware

PACE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LAKES OF NORTHDALE APARTMENTS 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 TWENTIETH DAY OF MARCH, A.D. 2012.

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You may verify this cortificate online

Jeffrey W. Bullock, Secretary of State

DATE: 03-20-12