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EXAMINER

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07-02-2012

NAME:

PALM BEACH MULTIFAMILY PARTNERS, LLC

TYPE OF FILING: APPLICATION BY FOREIGN LLC TO TRANSACT

BUSINESS IN FLORIDA

COST:

\$160

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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Palm Beach Multifamily Partners, LLC		
(Name of Limi	ted Liability Company)	
The enclosed "Application by Foreign Limited Lial Florida," Certificate of Existence, and check are sullability company to transact business in Florida.	bility Company for Authorization to Transact Business in bmitted to register the above referenced foreign limited	
Please return all correspondence concerning this ma	atter to the following:	
Mr. Govan D. White		
(Nar	ne of Person)	
Palm Beach Multifamily Partners, LLC		
(Fir	n/Company)	
4515 Harding Road, Suite 210		
	(Address)	
Nashville, Tennessee 37205	r ~:	
(City/Sta	te and Zip Code)	
For further information concerning this matter, plea	se call:	
Govan D. White		
(Name of Person)	at (615) 250-1616 (Area Code & Daytime Telephone Number)	
MAILING ADDRESS:	STREET ADDRESS:	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount: \$\sum_{125.00}\$ \text{Filing Fee} \sum_{130.00}\$ \text{Filing Fee & Certificate of S}\$	S155.00 Filing Pec & \$\sigma \square \text{\$160.00 Filing Fee, Certificate} \\ \text{Status Certified Copy} \text{of Status & Certified Copy} align*	

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

IN COMPLIANCE WITH SECTION 608303, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

) Palm Beach Multifamily Pertners, LLC
(Name of Poreign 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 written 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 (FBI number, if applicable)
company is organized)
4. June 28, 2012 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6,
(Date first transacted business in Ffordia, if prior to registration.) (See sections 608.501 & 608.502 P.S. to determine penalty liability)
7, 4515 Harding Road, Sulte 210, Nashville, Tennessea 37205
(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:
Govan D. White, 4515 Harding Road, Suite 210, Nashville, Tennessee 37205
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in 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 oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida:
own and operate apartment complex
HILL
signature of a member or an authorized representative of a member.
(th acco clance will section 608,408(3), F.S., the execution of this document constitutes an efficient onder the penalties of perjury that the facts stated herein are true.)
Govern D. White
Typed or printed name of signoc

9. 96

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 L Palm Beach Multifamily Partners		
If name unavailable, the altern	ate name to be used in the state of Florida is:	
2. The name and the Florida s	treet address of the registered agent and office are:	
NRAI Services	s, Inc. (Nume)	ALLAS SE SEE
	e Park Drive, Suite 4 oride Street Address (P.O. Box <u>NOT</u> ACCEPTABLE)	ML -2 I
Weston	FL 33331 City/State/Zip	F SINT
	•	0A

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. NRAI Services, Inc.

By: Clark (Signature)

Eileen Chaddock, Special Asst. Secretary

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

5 5.00 Certificate of Status (optional)

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "PALM BEACH MULTIFAMILY PARTNERS,
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 TWENTY-NINTH DAY OF JUNE,
A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PALM BEACH MULTIFAMILY PARTNERS, LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF JUNE, A.D. 2012.

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

5177142 8300

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Jeffrey W. Bullock, Secretary of State
AUTHENTY CATION: 9680155

DATE: 06-29-12

You may verify this certificate online