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(((H12000209791 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : SALVATORI & WOOD, BUCKEL, PL

Account Number : I20030000112 Phone

: (239)552-4100

Fax Number

: (239)649-1706

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

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SCS @ Swbnaples. Com

Foreign Limited Liability Company Grand Oaks Apartments, LLC

Certificate of Status	0
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Aug. 21. 2012 1:17PM SALVATORI & WOOD (((H12000209791 3)))

COVER LETTER

TO: Registration Section Division of Corporations	
_{suвjecт:} Grand Oaks Apartment	
Name	e of Limited Liability Company
	ity Company for Authorization to Transact Business in Florida," Certificate of ove referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matt	er to the following:
Leo J. Salvatori	
	Name of Person
Salvatori, Wood & Buckel	
	Firm/Company
9132 Strada Place, Four	th Floor
	Address
Naples, FL 34108	
	City/State and Zip Code
scs@swbnaples.com	
E-mail address; (to	be used for future annual report notification)
For further information concerning this matter, please	e call:
Leo J. Salvatori	at (239) 552-4100
Name of Person	Area Code & Daytime Telephone Number
MAILING ADDRESS:	STREET ADDRESS:
Division of Corporations Registration Section	Division of Corporations Registration Section
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amoun \$125.00 Filing Fee \$130.00 Filing Fee Certificate of Statu	& [3155.00 Filing Fee & [3160.00 Filing Fee, Certificate

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

IN COMPLIANCE WITH SECTION 608503. FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER

LIMITED LIABILITY COMPANT TO TRANSACT BUSINESS BY THE 1. Grand Oaks Apartments, LLC	STATE OF FLORIDA.
(Name of Foreign Limited Liability Company; must inclu	de "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpo consent of the managers or managing members adopting the alter Company," "L.L.C.," "LLC.")	se of transacting business in Florida and attach a copy of the written mate name. The alternate name must include "Limited Liability
2. Delaware	
(Jurisdiction under the law of which foreign limited liab(lity company is organized)	(FEI number, if applicable)
	Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6	
(Date first transacted business in Flo (See sections 608.501 & 608.502 P.S.	rida, if prior to registration.) to determine penalty liability)
12809 Topping Meadows	72
St. Louis, MO 63131	6 F
	of Principal Office)
8. If limited liability company is a manager-managed	
9. The name and usual business addresses of the mans	
Eric J. Morgan, 12809 Topping Meadows, S	t. Louis, MO 63131
10. Attached is an original certificate of existence, no more than 90 d the jurisdiction under the law of which it is organized. (A photocopy manslation of the certificate under oath of the translator must be subm	
11. Nature of business or purposes to be conducted or	promoted in Florida:
Ownership and operation of a residential	apartment complex.
	horized representative of a member.
penalties of perjury that the facts stated herein are tru	tion of this document constitutes an affirmation under the
Leo J. Salvatori	a third degree felony as provided for in s.817.155, F.S.)

Typed or printed name of signee (((H12000209791 3)))

(((H12000209791 3))) 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 Company is:
Grand Oaks 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:
Salvatori, Wood & Buckel, P.L.
(Name)
9132 Strada Place, Fourth Floor Florida Street Address (P.O. Box NOT ACCEPTABLE)
Naples FL 34108
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)
\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GRAND OAKS 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 AUGUST, A.D. 2012.

5199230

120947681 You may verify this certificate online at corp.delaware.gov/authver.shtml

Jeffrey W. Bullock, Secretary of State ICATION: 9790850

DATE: 08-20-12