

| (Requestor's Name)   |
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| (Address)  |
| (Address)  |
| (City/State/Zip/Phone #)   |
| PICK-UP WAIT MAIL  |
| (Business Entity Name)   |
| (Document Number)  |
| Certified Copies Certificates of Status  |
| Special Instructions to Filing Officer: CORRECTION PER CONVERSATION WITH CORAL ST. PIERRE 9-14-2012 X5 |
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# NASON YEAGER GERSON WHITE & LIOCE, P.A. ATTORNEYS AT LAW

MELLON UNITED NATIONAL BANK TOWER 1645 PALM BEACH LAKES BOULEVARD SUITE 1200

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September 7, 2012

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re:

North Tract, LLC

Our File No. 9346/21374

Dear Sir/Madam:

Enclosed herewith please find an Application by Foreign LLC for Authorization to Transact Business in Florida, Certificate of Existence and check in the amount of \$130.00, representing the filing fee for the Application and a Certificate of Status.

Please return any correspondence to my attention. Please contact Coral at 561-471-3528 with any questions.

Thank you.

Sincerely,

NASON, YEAGER, GERSON, WHITE & LIOCE, P.A.

Bridget M. Mann, CP, FRP

Certified Paralegal

#### Enclosures

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1. | North Tract, LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")  |
|----|---|
| ÇO | name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writtensent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability mpany," "L.L.C," "LLC.")   |
|    | Delaware  (Jurisdiction under the law of which foreign limited liability company is organized)  3. applied for (FEI number, if applicable)  |
| 4. | September 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. | 4119 Burns Road   |
|    | Palm Beach Gardens, Florida 33410  (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  |
|    | John A. Cross, 4119 Burns Road, Palm Beach Gardens, Florida 33410   |
|    |   |
| he | Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a slation of the certificate under oath of the translator must be submitted.) |
| 11 | . Nature of business or purposes to be conducted or promoted in Florida:  |
|    | Signature of a member of an authorized representative of a member.  |

Alan I. Armour II, Authorized representative

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties 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.)

### 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.

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| 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 | : |  |  |
|  | GLAN 1. ARMOUR 11 (Name)  |   |  |  |
| <u> </u>   | Florida Street Address (P.O. Box NOT ACCEPTABLE)                  | 0 |  |  |
| ٧  | Vest Palm Beach <sub>FL</sub> 33401                               |   |  |  |

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

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#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "NORTH TRACT, 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 TENTH DAY OF SEPTEMBER, A.D. 2012.

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

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Jeffrey W. Bullock, Secretary of State

AUTHENTYCATION: 9833862

DATE: 09-10-12

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