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Foreign Limited Liability Company LSREF2 GATOR (LAKE MARY), LLC

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COVER LETTER

	LSREF2 Gator (Lake Mary), LLC	•			
SECT: .		Name of Limited Liability Company	,		
		Liability Company for Authorization to Transact Business in above referenced foreign limited liability company to transact			
se return	all correspondence concerning this	s matter to the following:			
	Dianna H. Heise				
		Name of Person			
	c/o Hudson Advisors LLC				
•		Firm/Company			
	2711 N. Haskell Avenue, Suite	: 1800	2 co	200	₹ ₩ ;
		Address	Transition of the second	70	₹¥
	Dallas, Texas 75204			9	,
		City/State and Zip Code			Ï
	diheise@hudson-advisors.com		# 47A	(A)	Ĭ
	_	s: (to be used for future annual report notification)	120 FT)	0.) 12.	
further int	formation concerning this matter, p	please cail:	,**		
Diani	na H. Heise	at (214) 754-8400			
	Name of Person	Area Code & Doytime Telephone Number			
Divis Regis P.O.	LING ADDRESS: tion of Corporations stration Section Box 6327 hassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle			
		Tallahassee, FL 32301			
	a check for the following am 00 Filing Fee \$130.00 Filing Certificate of	Fee & \$155.00 Filing Fee & \$160.00 Filing Fee.	, Certificate ed Copy		

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: LSREF2 Gator (Lake Mary), LLC (Name of Foreign 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 (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 07/27/2012 Perpetual (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") 08/31/2012 (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) Haskell Avenue. (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: WE IT LSREF2 Gator Sub REO, LLC 2711 N. Haskell Avenue, Suite 1700 Dallas, Texas 75204 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 outh of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Real Estate Investments Signature of a member or an authorized representative of a member. (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.)

Marc L. Lipshy, V P of LSREF2 Gator Sub REO, LLC "Managing Member"

Typed or printed name of signee

90/60 3994

TOMORPOINE T TOMOR ONE.

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.

	11-4-4	- 1 t - 41	
II UDAVAHA	bie, the aiternate to be use	ed in the state of Florida is:	
2. The nan	ne and the Florida street a	address of the registered agent and office a	are:
	C T Corporation System		•
	(Name)		200
	1200 South Pine Island Road		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		
			6
	Plantation	FL 33324	
		City/State/Zip	100 mg
			हिंग ह
lability con igent and a relating to t	npany at the place designa gree to act in this capacity he proper and complete pe of my position as registere	ent and to accept service of process for the a need in this certificate, I hereby accept the a y. I further agree to comply with the provisi erformance of my duties, and I am familiar ed agent as provided for in Chapter 608, Fla on System	ppointment as registered ions of all statutes with and accept the
oonganons	By:	Michael Jones Assistant Secretary	

Certified Copy (optional)

5.00 Certificate of Status (optional)

\$ 30.00

Delaware

DACK 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "LSREF2 GATOR (LAKE MARY), 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 EIGHTEENTH DAY OF SEPTEMBER, A.D.
2012.

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

APLIANASSES FLORIDA

5190637 8300

121043098

You may verify this cortificate online

Jeffrey W. Bulkack, Sacretary of State
AUTHENTICATION: 9854444

DATE: 09-18-12