Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000021361 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

· To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

: (850)222-1092

Fax Number

1 (850)878~5368

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

Email	Address:	 	 	 		

### Foreign Limited Liability Company

EECO LANDMARK AT AUTUMN VISTA MANAGEMENT, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

MAN 2 9 2017

Electronic Filing Menu

Corporate Filing Menu

Help

D. BRUCE

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

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

1 Elco Landmark at Autumn Vista Management, LLC

1. Elco Landmark at Autumn Vista Management, 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 consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Li Company," "L.L.C." "LLC.")	the written ability
2. Delaware 3, 46-1794375	
(Jurisdiction under the law of which foreign limited liability (FBI number, if applicable) company is organized)	,
January 10, 2013 S. Perpetual	
(Date of Organization) (Duration: Year limited liability company will cease exist or "perpetual")	to
6. Company will begin transacting business in Florida upon registration.	
(Date first transacted business in Florids, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	<del>_</del> ~
7 Elco Landmark Residential Holdings II LLC	2018 SEC
825 Parkway Street, Suite 4, Jupiter, FL 33477	JAN JAN
(Street Address of Principal Office)	28 ARY SE
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:	10: 5
Managing Member:	\$E 2
Elco Landmark Residential Holdings II LLC	
825 Parkway Street, Suite 4, Jupiter, FL 33477	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fixelen language 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: Real estate	of records in
management and services	
	'
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 flexs stated hereif 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.)	
Joseph G. Lubeck, President	•

01/58/5013 10:03 8020330035

Typed or printed name of signee

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 of 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. 1	he name	of the	Limited	Liability	Company	y is
------	---------	--------	---------	-----------	---------	------

## Elco Landmark at Autumn Vista Management, LLC

If unavailable, the alternate to be used in the state of Florida is:

2.	The name and	the	Florida street	address	of the register	ed agent ar	id office are:
----	--------------	-----	----------------	---------	-----------------	-------------	----------------

Joseph G. Lubeck

(Name)

825 Parkway Street, Sulte 4

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Jupiter

33477

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

// /

ignature)

\$100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

01/58/5013 IE:03 8029330055

Statutes.

# Delaware

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO REREBY CERTIFY "ELCO LANDMARK AT AUTUMN VISTA MANAGEMENT, 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-EIGHTH DAY OF JANUARY, A.D. 2013.

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

5272744 8300

130097511

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

AUTHENTICATION: 0173373

DATE: 01-28-13