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SECRETARY OF STATE

CR2E027 (9/10)

COVER LETTER

TO:

Registration Section Division of Corporations

Whitepalm Residences, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all

Please return all correspondence concerning this matter to the following:
Matt Benak
Name of Person
LIV Development
Firm/Company
2204 Lakeshore Drive, Suite 135
Address
Birmingham, AL 35209
City/State and Zip Code
matt@livdev.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Matt Benak205484-2842
Name of Danson Anna Codo & Dautima Talanhana Numban

Name of Person

Area Code & Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

□ \$125.00 Filing Fee

■ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

□ \$160.00 Filing Fee, Certificate of Status & Certified 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:

1. Whitepalm Residences, LLC (Name of Foreign Limited Liability Company; mus				' "L.L.C.,	or "LL"	C.")	
(If name unavailable, enter alternate name adopted for the consent of the managers or managing members adopting the Company," "L.L.C," "LLC.")							
_{2.} Delaware	:	3.	46-1610220				
(Jurisdiction under the law of which foreign limited liab company is organized)			(FEI number, if	applicab	le)		
_{4.} January 3, 2013		5.	Perpetual				
(Date of Organization)	•		(Duration: Year limited liab exist or "perpetual")	ility com	any will	cease	to
_{6.} March 4, 2013							
(Date first transacted business (See sections 608.501 & 608.50	s in Fid 02 F.S	orio	la, if prior to registration.) determine penalty liability)		وره کشید		
7. 2204 Lakeshore Drive, Suite 135						ω <u>∓</u>	nerraliza j
Birmingham, AL 35209					3.50	70 -	Changes Changes
-	ddress	of	Principal Office)		EN CO	P	177
8. If limited liability company is a manager-man	naged	co	mpany, check here		FISH	က သ	Ö
9. The name and usual business addresses of the	e man	ag	ing members or manager	s are as	föllows	. ::	
LIV Whitepalm, LLC							
2204 Lakeshore Drive, Suite 13	15						
Birmingham, AL 35209							
10. Attached is an original certificate of existence, no more the jurisdiction under the law of which it is organized. (A phranslation of the certificate under eath of the translator must	hotocop	ру	is not acceptable. If the certifica		_	•	
11. Nature of business or purposes to be conduct	eted or	rр	romoted in Florida: Acc	uisition	, devel	opme	ent,
operation, and leasing of real est	tate	p	roject.				_
MS Top	1//		64				 '
Signature of a member of	an au	ijK	orized representative of a	membe	– r.		
(In accordance with section 608.408(3), F.S., the							
penalties of perjury that the facts stated herein document to the Department of State cons							

Typed or printed name of signee

Robert B. Crumpton, III

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.

Please see attached consent.						
If unavailable, the alternate to be used in the state of Florida is:						
2. The name and the Florida street address of	of the registered agent and office are:					
	(Name)					
Florida Street Add	ress (P.O. Box NOT ACCEPTABLE)					
	FL City/State/Zip					
liability company at the place designated in the registered agent and agree to act in this capa statutes relating to the proper and complete p	to accept service of process for the above stated limited his certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, Florida					
(Signa	iture)					
\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional) Certificate of Status (optional)					

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE: 2/28/2013

. . . .

ENTITY NAME: WHITEPALM RESIDENCES, LLC

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 236 East 6th Avenue Tallahassee, FL 32303

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in that capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statutes.

Ninh Ho, Assistant Secretary

Paracorp Incorporated

Winh for

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "WHITEPALM RESIDENCES, 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-SEVENTH DAY OF FEBRUARY, A.D.

2013.

5269455 8300

130240001

AUTHENTY CATION: 0245235

DATE: 02-27-13

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