# M13000001496

(Re	questor's Name)			
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

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#### COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: LIV Whitepalm, 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 correspondence concerning this matter to the following:

### Matt Benak

Name of Person

LIV Development LLC

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 Benak

,205

484-2842

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:

(If name unavailable, enter alternate name adopted for the purconsent of the managers or managing members adopting the a Company," "L.L.C," "LLC.")	rpose	of transacting business in Floate name. The alternate name	rida and attach a copy of the writte must include "Limited Liability
<sub>2.</sub> Alabama	3.	46-2029180	÷.
(Jurisdiction under the law of which foreign limited liability company is organized)	y	(FEI number,	f applicable)
4. February 15, 2013	5	Perpetual	
(Date of Organization)	٥.	(Duration: Year limited lia	bility company will cease to
6 March 8, 2013		( )/	25.7
(Date first transacted business in (See sections 608.501 & 608.502 l	Flor F.S. t	ida, if prior to registration.) o determine penalty liability)	Day or
7. 2204 Lakeshore Drive, Suite 135			Sale Co
Birmingham, AL 35209			
(Street Addr	ess o	f Principal Office)	<u></u>
8. If limited liability company is a manager-manag	ed c	ompany, check here 🔳	
9. The name and usual business addresses of the m	anas	ging members or manage	rs are as follows:
Robert B. Crumpton, III			
2204 Lakeshore Drive, Suite 135			
Birmingham, AL 35209			

operation, and leasing of real estate project.

11. Nature of business or purposes to be conducted or promoted in Florida: Acquisition, development,

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.)

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.

The name of the Limited Liability Company is:  Please see the attached consent form.					
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 stered agent as provided for in Chapter 608, Florida				
(Signa	ature)				
\$ 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: 3/5/2013

ENTITY NAME: LIV WHITEPALM, LLC

#### **REGISTERED AGENT NAME AND ADDRESS:**

Paracorp Incorporated 236 East 6<sup>th</sup> 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 Ho

Beth Chapman Secretary of State P. O. Box 5616 Montgomery, AL 36103-5616

## STATE OF ALABAMA

I, Beth Chapman, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that LIV Whitepalm, LLC was formed in Jefferson County, Alabama on February 15, 2013. The Alabama Entity Identification number for this entity is 070-918. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20130227000002000

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

2/27/2013

Date

Beth Chapman

Beth Chapman

Secretary of State



## State of Alabama Department of Revenue

### **Certificate of Good Standing**

LIV Whitepalm, LLC is in compliance with the Alabama business privilege tax payment and return requirements in Chapter 14A, Title 40, Code of Alabama 1975 as of the date of issuance. This certificate is valid for sixty days from the date of issuance.

IN WITNESS WHEREOF, I hereunto set my hand this date of March 05, 2013.

Director, Individual and Corporate Tax Division

ATTEST:

Secretary

Business Privilege Tax

Phone: 334-353-7923

Fax: 334-242-8915

Request Date: March 04, 2013 Request Code: 1303044072386