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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)222-1092

Phone Fax Number

: (850) 222-1092

FAX MEMBEL : (650/676-5506

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Foreign Limited Liability Company PEDALER'S POND, LLC

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ALLAHASSEE. FLORIDA

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subject: _		Name of l	Limited Liability	Company		- -
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Please return :	ill correspondence	concerning this matter to	the following:			
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or further info	rmation concernin	g this matter, please call:				
Gary	M. Remer, Esq.		248	827-18	63	
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☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate
Certified Copy 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: Pedalor's Pond, 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," "LL.C," "LLC." 2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) March 7, 2013 (Duration: Year limited liability company will cease exist or "perpetual") (Date of Organization) (Date first transacted business in Floride, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 31200 Northwestern Highway Farmington Hills, Michigan 48334 (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: American Home Portfolio Holdings, LLC 31200 Northwestern Highway, Farmington Hills, MI 48334 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 fireign language, a translation of the certificate under each of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: To hold, sell, assign, transfer, operate, lease, manage, mortgage, pledge and otherwise deal a manufactured home community. Signature of a member or an authorized representative of a member. (In accordance with exciton 608.408(3), F.S., the execution of this document constitutes an effirmation under the penalties of perjury that the facts sinted 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 8.817.155, F.S.)

PLUST - 12/03/2012 Wolles Killwer Galles

Gary M. Remer, Authorized Representative

Typed or printed name of signee

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: Pedaler's Pond, LLC					
If unavailable, the alternate to be used in the state of Florida is:					
2. The name and	the Florida street a	address of the registered agent and office are:			
		C T Corporation System			
_		(Name)			
		1200 South Pine Island Road			
	Plorida S	treet Address (P.O. Box NOT-ACCEPTABLE)			
P	lantetion	FL 33324			
•••		City/Stute/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 Statutes.

By: CT Corporation System

Angel Shearer
Assistant Secretary

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

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Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "PEDALER'S POND, 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 FOURTEENTH DAY OF MARCH, A.D. 2013.

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

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

AUTHENTY CATION: 0284002

DATE: 03-14-13

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