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NAME:

CONCERT CARROLLWOOD, LLC

TYPE OF FILING: APPLICATION

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COVER LETTER

TO:

Registration Section

Enclosed is a check for the following amount:

[X]\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status

Division of Corporations		
SUBJECT: CONCERT CARROLI	_WOOD, LLC	
	une of Limited Liability Company	
	bility Company for Authorization to Transact Business in Florid above referenced foreign limited liability company to transact bu	
Please return all correspondence concerning this n	natter to the following:	
Capitol Services Corpor	ate Filings Team	
	Name of Person	
Capitol Services, Inc.		.
	Firm/Company	
800 Brazos, Suite 400		
	Address	
Austin, TX 78701		_
	City/State and Zip Code	
pnanula@concertcap	ital.com (to be used for future annual report notification)	IMPORTANT: The email address entered here will be
For further information concerning this matter, ple		utilized for future ANNUAL REPORT NOTIFICATIONS!!
	at (<u>800</u>) 345-4647	
Name of Person	Arca Code & Daytime Telephone Number	
MAILING ADDRESS:	STREET ADDRESS:	
Division of Corporations Registration Section	Division of Corporations Registration Section	
P.O. Box 6327	Clifton Building	
Tallahassec, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	

S155.00 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:

I. CONCERT CARROLLWOOD, 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 a consent of the managers or managing members adopting the alternate name. The alternate name must Company," "L.L.C," "LLC.") 2 Delaware 3	Include "Limited Liability
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if approximately soft and the law of which foreign limited liability company is organized)	olicable)
4. May 6, 2013 (Date of Organization) 5. perpetual (Duration: Year limited liability exist or "perpetual")	company will cease to
ζ.	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	(C)
7.	
1 Coastal Oak, Newport Coast, CA 92657 (Street Address of Principal Office)	Saget
(Street Address of Principal Office)	5
8. If limited liability company is a manager-managed company, check here 🗸	My Carlot
9. The name and usual business addresses of the managing members or managers are	e as follows:
FC Golf GP, LLC	
1 Coastal Oak, Newport Coast, CA 92657	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the office the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in 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: Any la	wful purpose
under the laws of the States of Delaware and Florida	
John In Thace	
Signature of a member or an authorized representative of a me	
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affi penalties of perjury that the facts stated herein are true. I am aware that any false informat document to the Department of State constitutes a third degree felony as provided for	ion submitted in a
John M. Theirl	<u> </u>
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.

CONCERT CARROLLWOOD, LLC	
If unavailable, the alternate to be used in the state of Florida is:	- 100 To
2. The name and the Florida street address of the registered agent and office are:	S or
Capitol Corporate Services, Inc. (Name)	
155 Office Plaza Dr Ste A Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Tallahassee FL 32301 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 Statutes.

Knowski.

· ***

1. The name of the Limited Liability Company is:

Krista Ali, Assistant Secretary on behalf of Capitol Corporate Services, Inc.

(Signature)

\$ 100,00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "CONCERT CARROLLWOOD, 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 SIXTH DAY OF MAY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CONCERT."

CARROLLWOOD, LLC" WAS FORMED ON THE SIXTH DAY OF MAY, A.D. 2013.

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

5329782 8300

130529235

AUTHENTY CATION: 0408938

DATE: 05-06-13

You may verify this certificate online