Division of Corporations Electronic Filing Cover Sheet

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Foreign Limited Liability Company Regency Marianna LLC

Certificate of Status	1
Certified Copy	1
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Estimated Charge	\$160.00

K. SALY EXAMINER

MAY 1 0 2013

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Corporate Filing Menu

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5. m. 6007 () . 10	COVER LETTER
	gistration Section vision of Corporations
UBJECT:	Rogency Marianna LLC
10047771	Name of Limited Liability Company
he enclosed ixistence, an	d "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of and chack are submitted to register the above referenced foreign limited liability company to transact business in Florida
lcase return	all correspondence concerning this matter to the following:
	Christopher L. Lucus
	Name of Person
	Bowers Harrison, LLP
	Firm/Company
	25 N.W. Riverside Drive, 2nd Ploor
	Address
	Evensville, IN 47708
	City/State and Zip Code
	oll@bowerrharrison.com
	B-mail address: (to be used for future annual report notification)
or further in	formation concerning this matter, please call:
Chri	istopher L. Lucas 812 491-8239
·	Name of Person Area Code & Daytime Telephone Number
Divi Regi P.O.	LLING ADDRESS: sion of Corporations Division of Corporations intration Section Box 6327 Cliffon Building ahasses, FL 32314 Cliffon Building Tallahasses, FL 32301
	a check for the following amount: 125.00 Filing Fee

IN COMPLIANCE WITH SECTION 608303, FLORIDA STATU LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN TI	TISS, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN
Regency Marlenna LLC	id divis of produce
(Name of Foreign Limited Liability Company, must incl	ude "Limited Liability Company," "L.L.C.," or "LLC.")
consent of the managers or managing members adopting the alt Company," "L.L.C." "LLC.")	ose of transacting business in Florida and attach a copy of the written ernate name. The alternate name must include "Limited Liability
2. Indiana	3. 35-2004-596
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, If applicable)
4. May 6, 2013	5. porpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpotual")
5. (Date first transacted business in F (See sections 608.501 & 608.502 F.)	florida, if prior to registration.) S. to dotermine penalty liability)
7. 330 Cross Point Blvd.	SEFF
Evansville, IN 47715	For
(Street Addres	s of Principal Office)
3. If limited liability company is a manager-managed	d company, check here 🛛
9. The name and usual business addresses of the ma	naging members or managers are as follows:
Regency Commercial Associates LLC, Atm: Kevin L. Ha	mmett, 336 Cross Pointe Boulevard, Evansville, IN 47715
10. Attached is an original certificate of existence, no more than 9 the jurisdiction under the law of which it is organized. (A photox canslation of the cartificate under eath of the translator must be su	
1. Nature of business or purposes to be conducted of	or promoted in Florida: Ownership, leasing,
management and development of commercial real estate and	d all other logal sotivities.
Ch23	
	uthorized representative of a member.
penalties of perjury that the facts stated herein are to	cution of this document constitutes an affirmation under the rue. I am aware that any false information submitted in a se a third degree folony as provided for in s.817.155, F.S.)
Christopher L. Lucas, Attorney	
Transfer winter	d some of planes

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.

1. The name of the Limited Liability Company is: Regency Marianna LLC				
If unavailable,	, the alternate to be	o used in the state of Florida is:		
2. The name	and the Florida stre	eet address of the registered agent and office are:		
	C T Corporation System			
***,	•	(Narro)		
	1200 South Pine Island Road			
Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	Plantation	FL 33324		
		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 duttes, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

By: Bernadette Baker

(Signature) Assistant Secretary

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

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I, Connie Lawson, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

REGENCY MARIANNA LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on May 06, 2013, and was in existence or authorized to transact business in the State of Indiana on May 08, 2013.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Eighth Day of May, 2013.

Corrie Lawson

Connie Lawson, Secretary of State

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