M3000003311

Office Use Only



600248297686

05/28/13--01038--009 **130.00

2013 MAY 28 PH 4: 18
SECRETARY OF STATE
TALL AHASSEF FLORIO.

B. BOSTICK
MAY **2 9** 2013

EXAMINER

ごりつじひろう	$I \cap I \cap I \cap I$
CR2E027	19/101

COVER LETTER

TO:	Registration Section
	Division of Corporation

SUBJECT:	Value Place Ft Meyers FL East LLC
	Name of United 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 corres	pondence c	oncerning this r	natter to the fol	lowing:					
Ka	thleen	R. Leal							
			Name	of Person				_	
Fo	ulston	Siefkin	LLP						
			Firm/0	Company					
15	51 N W	/aterfron	t Parkwa	y, Suite ′	100				
			Ad	ldress				_	
Wi	chita,	KS 672	06						
			City/State	and Zip Code				_	
jwa	llace (@valuep	olace.co	m					
		E-mail address	(to be used for	future annual	report notif	cation)	TALL	201	
For further information	concerning	g this matter, plo	ease call:				AH, CRE	2013 HA Y	רו־
Kathleen R Leal		a	316 291-9787		ASSE ASSE	Y 28	F-0-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		
	Name o	of Person	Area Co	de & Daytime	Telephone	Number	TO:	P	
MAILING A Division of C Registration S P.O. Box 632 Tallahassee, F	orporations lection 7		Division of Registration Clifton Bui	lding Itive Center Ci	rcle		ONDI	4: 18	
Enclosed is a check □ \$125.00 Fi		ollowing amo \$130.00 Fil Certificate	ingFee & 📱	\$155.00 Filin Certified Co		□ \$160.00 i of Status	Filing Fee, & Certific		

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:

Lli	MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1.	Value Place Ft Myers FL East LLC
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
co	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written nsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Impany," "L.L.C," "LLC.")
	Kansas 3. N/A
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4	May 21, 2013 _{5.} Perpetual
1.	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6.	
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	8621 E 21st Street North, Suite 250, Wichita, KS 67206
	(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:
	Value Place LLC
	8621 E 21st Street North, Suite 250
	Wichita, KS 67206
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a slation of the certificate under oath of the translator must be submitted.)
11	. Nature of business or purposes to be conducted or promoted in Florida: To engage in any act or
	activity for which limited liability companies may be organized under the Florida Limited
	Liability Company Act as now in effect or hereafter amended.
	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.)
	Kyle Rogg, COO of VP Property Holdings LLC

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.

1. The name of the Limited Liability Company is:

Katherine Lackey, Asst. Secy.

		F,			
Value Plac	ce Ft Myers FL Eas	t_LLC			
If unavailable, t	he alternate to be used in the	ne state of Florida is:			
2. The name an	d the Florida street address	s of the registered agent and office a	are:		
	С	T Corporation System			
	(Name)				
	1200 South Pine Island Road			2013 MAY 2	
	Florida Street Ad	dress (P.O. Box NOT ACCEPTABLE)	8.7.0F	28 PM	T
	Plantation	FL ³³³²⁴		-	"ب
		City/State/Zip	Ē	9	
liability company agent and agree relating to the pr obligations of my	y at the place designated in to act in this capacity. I fur oper and complete perform	to accept service of process for the a this certificate, I hereby accept the a ther agree to comply with the provis ance of my duties, and I am familiar at as provided for in Chapter 608, Fl	ppointment ions of all s with and a	t as reg statute. ccept t	gistered s

\$ 100.00 Filing Fee for Application

\$ 30.00 Certified Copy (optional)

5.00

\$ 25.00 Designation of Registered Agent

Certificate of Status (optional)

STATE OF KANSAS **OFFICE OF SECRETARY OF STATE** KRIS W. KOBACH

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 6909345

Entity Name: VALUE PLACE FT MYERS FL EAST LLC

Entity Type: KANSAS LTD LIABILITY COMPANY

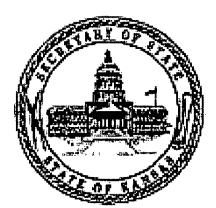
State of Organization: KS

Resident Agent: HARVEY R. SORENSEN

Registered Office: 1551 N Waterfront Parkway Suite 100, WICHITA, KS 67206

was filed in this office on May 21, 2013, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of May 24, 2013

KRIS W. KOBACH SECRETARY OF STATE

Certificate ID: 576748 - To verify the validity of this certificate please visit https://www.kansas.gov/bess/flow/validate and enter the certificate ID number.