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TO: Registration Sect Division of Corpo				
SUBJECT: LG Sen	noran LaCosta,	LLC		
	Nan	ne of Limited Liability Company		
The enclosed "Application Existence, and check are s	by Foreign Limited Liab ubmitted to register the at	ility Company for Authorization pove referenced foreign limited li	to Transact Business in Florida," C iability company to transact busine	Certificate of ess in Florida
Please return all correspon	dence concerning this ma	tter to the following:		
Capito	l Services Corpora	ite Filings Team		
		Name of Person		
Capito	Services, Inc.			
		Firm/Company	Z:	201
800 B	razos, Suite 400			
		Address	37	. 699 . D
Austin	TX 78701		ന്ദ്ര സമ	22 AH 9
		City/State and Zip Code		ye C
scott@) leoncapitalgrou	p.com	The second secon	GED GUT
		o be used for future annual repor	notification)	
For further information co	ncerning this matter, pleas	se call:		
Micah	Caudle	at (800)	345-4647 Ext: 322	
	Name of Person	Area Code & Daytime Tele	phone Number	
MAILING ADD Division of Corpo Registration Secti P.O. Box,6327 Tallahassee, FL 3	orations on	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed is a check fo \$125.00 Filing Fe		e & X\$155.00 Filing Fee &	\$160.00 Filing Fee, Certificate of Status & Certified Copy	e

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 purpose of transacting business in Florida and attact	h a copy of the written
consent of the managers or managing members adopting the alternate name. The alternate name must include 'Company," "L.L.C," "LLC.")	"Limited Liability
2. Texas 3. 90-1011385	
(Jurisdiction under the law of which foreign limited liability company is organized) 3. 90-1011385 (FEI number, if applicable)	
4. August 9, 2013 5, perpetual	
(Date of Organization) (Duration: Year limited liability company exist or "perpetual")	y will cease to
6	تن ــــــــــــــــــــــــــــــــــــ
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	IES 22
7. 2311 Cedar Springs Road, Suite 100	
Dallas, Texas 75201	
(Street Address of Principal Office)	77
8. If limited liability company is a manager-managed company, check here 🗸	en en
9. The name and usual business addresses of the managing members or managers are as fol	lows:
LG Capital, LLC	
2311 Cedar Springs Road, Suite 100	
Dallas, Texas 75201	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign translation of the certificate under eath of the translator must be submitted.)	
11. Nature of business or purposes to be conducted or promoted in Florida:	
Owning and Leasing commercial real estate	·
Jalo de Tr	
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 penaltics 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.)

Fernando De Leon

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 Com	pany is:	
LG Semoran LaCosta, LLC		
If unavailable, the alternate to be used in the	ne state of Florida is:	
2. The name and the Florida street address	s of the registered agent and office are:	20 F
Capitol Corporate Ser	vices, Inc.	2019 A& 22 35 CAAAR WALLAHASS
	(Name)	の 数 数 数 数 数 数 数 数 数 数 数 数 数
155 Office Plaza Dr S	Ste A	
Florida Street Address (P.O. Box NOT ACCEPTABLE)		
Tallahassee	_{FL} 32301	
	City/State/Zin	_

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.

Coylewindle

Gayle Windle, 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)

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



John Steen Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for LG Semoran LaCosta, LLC (file number 801831374), a Domestic Limited Liability Company (LLC), was filed in this office on August 09, 2013.

It is further certified that the entity status in Texas is in existence.

2013 AND 22 AND 24 CONTROL OF STATE.

CONTROL AND ASSOCIATION OF STATE.

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In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on August 22, 2013.





John Steen Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB Come visit us on the internet at http://www.sos.state.tx.us/ Fax: (512) 463-5709 TID: 10264

Dial: 7-1-1 for Relay Services Document: 496805680003