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SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

	str ⁱ ation Section ion of Corporations						
SUBJECT:	CAP Lake Mary, LLC						
_		ne of Limited Liability Company					
		bility Company for Authorization to Transact Business in Florida," Certificate of bove referenced foreign limited liability company to transact business in Florida					
Please return a	all correspondence concerning this ma	atter to the following:					
	Lee Owens						
		Name of Person					
Smith Moore Leatherwood LLP							
Firm/Company							
PO Box 87							
Address							
Greenville, SC 29602							
City/State and Zip Code							
carrieb@capllc.com							
	E-mail address: (to be used for future annual report notification)						
For further inf	formation concerning this matter, plea	se call:					
Lec Owens		at (864) 240-2499					
	Name of Person	Area Code & Daytime Telephone Number					
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301					
	a check for the following amou .00 Filing Fee \$130.00 Filing Fe Certificate of Sta	ee & \$\Bigcap\$155.00 Filing Fee & \$\Bigcap\$\$160.00 Filing Fee, Certificate					

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:

	CARLAKA Mary LLC	STATE OF PLORIDA:		
ı.	CAP Lake Mary, LLC (Name of Foreign Limited Liability Company; must include the company) (Name of Foreign Limited Liability Company) (Name of Foreign Limited Liability Company) (Name of Foreign Limited Liability Company)	de "Limited Liability Company," "L.L.C.," or "LLC.")		
co	name unavailable, enter alternate name adopted for the purpos issent of the managers or managing members adopting the alter impany," "L.L.C," "LLC.")			
2.	South Carolina 3	(FEI number, if applicable)		
	(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)		
4.		December 31, 2085		
	(Date of Organization)	(Duration: Year limited liability company will cease exist or "perpetual")	to	
6.	(Date first transacted business in Flo	ride if prior to registration		
	(See sections 608.501 & 608.502 F.S.	to determine penalty liability)		
7.	935 S. Main Street, Suite 201	TA	20	
	Greenville, SC 29601		a SEP	TI
	(Street Address of	of Principal Office)	27	Ī
8.	If limited liability company is a manager-managed	company, check here 🛛 📆		ED
9.	The name and usual business addresses of the mana	aging members or managers are as follows	AN II: 03	
	Centennial American Real Estate, Ltd.			•
	Attn: David W. Glenn	•		
	935 S. Main Street, Suite 201, Greenville, SC 29601			
the	Attached is an original certificate of existence, no more than 90 disjurisdiction under the law of which it is organized. (A photocopy islation of the certificate under oath of the translator must be subn	is not acceptable. If the certificate is in a foreign language,		dsin
11	. Nature of business or purposes to be conducted or	promoted in Florida:		
	real estate ownership and development			
	D 1000	7 ()		

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.)

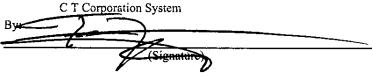
David W. Glenn as Trustee of the David W. Glenn Revocable Trust dtd 4/20/06

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:	•
CAP Lake Mary, LLC	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and o	office are:
C T Corporation System	
(Name)	SEC FALL
1200 South Pine Island Road	ORDER T
Florida Street Address (P.O. Box NOT ACCEPTABL	
Plantation FL 33324 City/State/Zip	
City/State/21p	: 03 ATE RIDA

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.



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

FL057 - 10/05/2010 C T System Online

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

CAP LAKE MARY, LLC, A Limited Liability Company duly organized under the laws of the State of South Carolina on September 20th, 2013, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-44-809 of the South Carolina Code, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 23rd day of September, 2013.

Mark Hammond, Secretary of State