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CORPDIRECT AGENTS, 515 EAST PARK AVENU TALLAHASSEE, FL 3230 222-1173		• •
FILING COVER SHE ACCT. #FCA-23	ET	
CONTACT: RIC	CKY SOTO	
DATE: <u>01/</u>	3/2014	
REF. #: 901	<u>0555</u>	
CORP. NAME: ST	RLING DAVIE, LLC	() A DETICUE OF DISCOULTED N
ARTICLES OF INCORPORT	AATION () ARTICLES OF AMENDMENT () TRADEMARK/SERVICE MARK	() ARTICLES OF DISSOLUTION () FICTITIOUS NAME
(XX) FOREIGN QUALIFICATI		() LIMITED LIABILITY
() REINSTATEMENT	() MERGER	() WITHDRAWAL
() CERTIFICATE OF CANCI	CLLATION	·
STATE FEES PREP	AID WITH CHECK# 70012743 FOR S	§ <u>130.00</u>
AUTHORIZATION	FOR ACCOUNT IF TO BE DEBITE	D:
· · · · · · · · · · · · · · · · · · ·	COST LI	MIT: \$
PLEASE RETURN:		
(a) CERTIFIED COPY	(X) CERTIFICATE OF GOOD STANDING	(XX) PLAIN STAMPED COPV
() CERTIFICATE OF STA	1 1	,
· () CENTIFICATE OF STA		

Examiner's Initials

COVER LETTER

SUBJECT:	Stirling Davie, LLC	N. C. C. C. L. C. C.
		Name of Limited Liability Company
		Liability Company for Authorization to Transact Business in Florida," Certificate of the above referenced foreign limited liability company to transact business in Florida
Please returi	all correspondence concerning thi	is matter to the following:
	·	
•	Douglas P. Krevolin	
		Name of Person
	Krevolin & Horst, LLC	
		Firm/Company
	1201 West Peachtree-Street, S	uite 3250
		Address
	Atlanta, GA 30309	·
		City/State and Zip Code
	denise@riverwaodproperties.e	
	E-mail addre	ss: (to be used for future annual report notification)
or further in	formation concerning this matter, p	please call:
Dou	iglas P. Krevolin	at (404) 888-9575
. —	Name of Person	Area Code Daytime Telephone Number
Divi Reg P.O.	ILING-ADDRESS: sion of Corporations istration Section Box 6327 ahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1	Stirling Davië, LLC		
	(Name of Poreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")		
ÇC	If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Lie Company," "L.L.C," "LLC.")		en
2.	Georgia 3.		
	(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)		
4.	upon filing		
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	Z¥	201
Ś,	3350 Riverwood Parkway, SE, Suite 450	— <u>()</u>	<u></u>
	Atlanta, Georgia 30339		JAN -
	(Street Address of Principal Office)		ယ်
Ġ.,	3350 Riverwood Parkway, SP., Suite 450		₽
	Atlanta, Georgia 30339	22	⇔
	. (Mailing Address)	ا ۱ ۲ ا	42
Le	. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: ceds Properties, Inc., Manager 350 Riverwood Parkway, SE, Suite 450		
A	ilania, Georgia 30339		
in t	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language is a station of the certificate under eath of the translator must be submitted.)		
	R. A. LL		
	Signature of an authorized person		
	(In accordance with section 605.0203, 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.)		
	Benjamin M. Lefkowitz, President		
	Typed or printed name of signee		

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	e, LLC	
lf unavailal	ple, the alternate to be used in the state of Florida is:	
2. The nan	ne and the Florida street address of the registered agent and office are:	2014 JA SECES TALLA
	NRAI Services, Inc.	ラステー
	(Name)	STEP I
	1200 South Pine Island Road	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	35
t (,
,	Plantation FL 33324	
	City/State/Zip	
iability con registered a statutes rela	n named as registered agent and to accept service of process for the above standard at the place designated in this certificate, I hereby accept the appointment and agree to act in this capacity. I further agree to comply with the provious to the proper and complete performance of my duties, and I am familiar with the proper and complete performance of my duties, and I am familiar with the provided for in Chapter 605, and I am familiar with the famil	ent as visions of all with and

25.00 30.00

5.00

Designation of Registered Agent

Certified Copy (optional)
Certificate of Status (optional)

STATE OF GEORGIA

Secretary of State Corporations Division 313 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER DATE INC/AUTH/FILED

: 13479073 : December 31, 2013

JURISDICTION
PRINT DATE

: Georgia : January 03, 2014

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

Stirling Davie, LLC
A Domestic Limited Liability Company

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

LS 1776

Brian P. Kemp Secretary of State

Tracking #: aiCmA4Zt