Florida Department of State

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Foreign Limited Liability Company CREFII Waramaug The Villages LLC

Certificate of Status	0
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Corporate Filing Menu

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N. Guellan FEH 1 7 2914

2/14/2014

COVER LETTER

TO:	Registration Section Division of Corporation	ons.		
SUBJE	CT: CREFII Warantau	g The Villages LLC		
	· · · · · · · · · · · · · · · · ·	Nexts of Limi	ted Liability Company	
Existen	ice, and check are submitt	ed to register the above roll	reased foreign limited li	to Transact Business in Florids," Certificate ability company to transact business in Flor
Picaso:	Legran #11 contembourgettee	concerning this matter to the	s 10110-mind:	
	Paul Nussbaum	<u> </u>		
		· _ · ·	lame of Person	
	CRRFII Waren	naug The Villages LLC		
		1	Тин/Сомраку	
	2500 N. Milita	ry Trail, Suite 275		
			Address	
	Boca Raton, Fi	. 1741	•	
	tree rates, r		State and Zip Code	
	paul.nussbaum3	9@am'sti eem		
	bustiturosen		d for future minual report r	at floation)
Por furt	ther information concerni	ng this matter, pleass call;		
	Paul Nussbaum		at (561) 99	7-0334
	Namo	of Contact Person	Area Coda	Daytimo Telephone Number
	MAILING ADDRESS		ET ADDRESS:	
	Division of Corporation Registration Section		n of Corporations with Section	
	P.O. Box 6327		Building	
	Tallahasace, FL 32314		kesuliva Center Circle 11100, PL 32301	
Englos	ed is a check for the	following amount:		
	2 \$125.00 Filing Foo	D \$130.00 Filing Pee & Certificate of Status	☐ \$155.00 Filing Fee Certified Copy	& 🖸 \$160.00 Filing Fee, Certificate of Status & Certified Copy

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. CRRPII Warmaug The Villages LLC	
(Name of Fereign Limited Limbility Company; must include "Limited Liability Company," "L.L.C.," or "LUC.")	Tapitage to
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Floride. The offerance name must include "Liability Company," "L.L.C," or "LLC.")	Limited
2. Delawaro Outlatfolion under the law of which foreign limited liability company is organized) (PEI number, if applicable)	
4. n/s (Date that transpoind business in Florids, if prior to registration.) (See sections 603,0904 & 603,0903, F.S. to determine penelty liability)	_
5 2500 N. Military Trail, Suite 275	
Boca Raton, FL 33431	三年
(Street Address of Principal Office) 6. 2500 N. Military Trail, Suits 275	
Boca Raton, FL 33431	_\$2.55 F
(Malling Address)	High R
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	- F.S.
Paul Nussbaum, Manager	_ 營捐
2500 N. Military Trail, Suite 275	, k -
Boca Raton, FL 33431	
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the chaving oustody of records in the jurisdiction under the law of which it is organized. (A photocopy is no acceptable. If the certificate is in a foreign language, a translation of the certificate under eath of the tramust be submitted)	ot ,
Signature of an authorized person In accordance with section 605.0203, P.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated is an aware that any false information submitted in a document to the Department of State constitutes a third degree follows as provided for in s.817.155, P.	aroin and trus, (5.)
Paul Nussbaum, Manager	
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.

i. The na	me of the Limited Liability Comp	any is:	
CREFII W	arameng The Villages LLC		
If unavails	able, the alternate to be used in th	state of Florida is:	
2. The na	me and the Florida street address	of the registered agent and office are:	SEC
	C T Corporation System		
		(Name)	- SSA
	1206 South Pine Island Road		
	Florida Street Ad	iress (P.O. Box NOT ACCEPTABLE)	9
	Plantation	PL 33324	
		City/State/Zip	-
liability oo registered statutes re	mpany at the place designated in t agent and agree to act in this capa lating to the proper and complete p	to accept service of process for the abo his certificate, I hereby accept the app city. I further agree to comply with th performance of my duties, and I am fan tared agent as provided for in Chapter	ointment as e provisions of all niliar with and
	By: CT Corporation System (Signs		ie Bates Asst. Secy
	\$ 100,00 \$ 25.00 \$ 30.00 \$ 5.00	Filing Fee for Application Designation of Registered Agent Cartified Copy (optional) Certificate of Status (optional)	

Delaware

PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CREFII WARAMAUG THE VILLAGES LLC"

IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF FEBRUARY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5476000 8300

140166628

You may verify this certificate online at corp. delaware. Cov/authyer. whimi

AUTHENTY CATION: 1129432

DATE: 02-12-14