## M 14000 Boiso 3

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W13-17022

Office Use Only



300245810243

03/20/13-01017-010 \*\*155.00

J. Shivers MAR 0 6 2014



March 22, 2013

WILLIAM MACOMBER 777 SOUTH FLAGLER DRIVE, STE. 800 WEST TOWER WEST PALM BEACH, FL 33401

SUBJECT: ROARING BROOK DEVELOPMENT, LLC

Ref. Number: W13000017022

We have received your document for ROARING BROOK DEVELOPMENT, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Leslie Sellers Regulatory Specialist II

Letter Number: 813A00006901

CR2E027 (9/10)

#### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT: Roaring Brook Development, LLC

Name of Limited 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 correspondence concerning this matter to the following:

Please return an correspondence concerning this matter to the following:
William Macomber
Name of Person
Roaring Brook Development, LLC
Firm/Company
777 South Flagler Dr., Suite 800 West Tower
Address
West Palm Beach, FL 33401
City/State and Zip Code
wm@roaringbrook.net
E-mail address: (to be used for future annual report notification)
For turther information concerning this matter, please call:
William Macomber at (310) 442-7896
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton Building
Tallahassee, FL 32314  2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:  \$\Bigsig \\$125.00 \text{ Filing Fee} \Bigsig \\$130.00 \text{ Filing Fee} \& \Bigsig \\$155.00 \text{ Filing Fee} \& \Bigsig \\$160.00 \text{ Filing Fee}, \text{ Certificate}
Certificate of Status Certified Copy of Status & Certified Copy

### 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 RUSINESS IN THE STATE OF FLORIDA:

Roaring Brook Development, LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.	L.C.," or "LLC.")
f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida a posent of the managers or managing members adopting the alternate name. The alternate name must ompany," "L.L.C," "LLC.")	
Delaware 3. 95-4840424	
(Jurisdiction under the law of which foreign limited liability (FEI number, if app company is organized)	licable)
Date of Organization)  5. perpetual (Duration: Year limited liability exist or "perpetual")	company will cease to
(Data Grat (supported business in Florida, if asian to registration)	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	A site of the second
777 South Flagler Dr. Suite 800 West Tower	
Wort Polm Beach, FL 33401 (Street Address of Principal Office)	· su
(Street Address of Principal Office)	- <u>* M</u>
If limited liability company is a manager-managed company, check here	ු ක දැන ශ්
. The name and usual business addresses of the managing members or managers are	e as follows:
William Macomber, 777 South Flagler Dr. Suite 800 West Tower, West Palm Beach, FL	
). Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the off	icial haring quetody of moonle
e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is	
anslation of the certificate under oath of the translator must be submitted.)	
Nature of business or purposes to be conducted or promoted in Florida:	
Investment Holding Company	
	·
Signature of a member or an authorized representative of a me (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affi	
penalties of periury that the facts stated herein are true. I am aware that any false informati	

document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Typed or printed name of signee

William Macomber

### 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.

If unavailable,	he alternat	e to be used	in the state o	f Florida is	·			· · ·
2. The name ar	nd the Flor	da street ad	ldress of the re	egistered ag	ent and o	office are:	• . •	
	WHAT !	William	Masola					
•	,		(Na	me)			· · · · · · · · · · · · · · · · · · ·	
, .	777	S. FI	cet Address (P.C	Sut	. 300	Wost-	Touch	h.
		Florida Str	reet Address (P.C	D. Box NOT A	CCEPTABL	E)		
	West	P.I.B	City	FL	340			i.j
			City	/State/Zip				_
		· · · .						ن د : د : : : : : : : : : : : :
Having been na- liability compan registered agent statutes relating accept the oblig	y at the pla and agree to the prop	ice designate to act in the per and com	ted in this cert is capacity: I j uplete perform	ificate, I her further agre ance of my	reby acce re to comp duties, ar	pt the app ply with th id I am fui	ointment a le provision niliar with	s ns of a and

(Signature)

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

# Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ROARING BROOK DEVELOPMENT, 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 TWENTY-EIGHTH DAY OF FEBRUARY, A.D.

2013.

3347602 8300

130210760

AUTHENTY CATION: 0247895

DATE: 02-28-13

You may verify this certificate online at corp.delaware.gov/authver.shtml