Division of Corporations Electronic Filing Cover Sheet

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(((H14000052994 3)))



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To:

Division of Corporations

Fak Number : (850)617-6383

From:

Actount Name : TRIAD PROFESSIONAL SERVICES, LLC

Account Number : 120020000094 Phone : (770)777-2091

Fax Number

: (770)220-1943

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

Foreign Limited Liability Company BR Carroll Lansbrook, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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3/5/2014 8:18:18 AM PAGE 1/001 Fax Server



March 5, 2014

FLORIDA DEPARTMENT OF STATE

TRIAD PROFESSIONAL SERVICES, LLC Division of Corporations

SUBJECT: BR CARROLL LANSBROOK, LLC

REF: W14000014083

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

call (850) 245-6051.

If you have any questions concerning the filing of your document, please

Tim Burch Regulatory Specialist II FAX Aud. #: H14000052994 Letter Number: 014A00004758

Registration Section

TO:

COVER LETTER

SUBJECT: Name of Limited Liability Company	•
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Existence, and check are submitted to register the above referenced foreign limited flability company to transact business.	
Please return all correspondence concerning this matter to the following:	
Jason Hall	
Name of Person	21
Bluerock Real Estate Holdings, LLC	2014 MRR -7
Firm/Company	
27777 Franklin Road, Ste. 900	
Address	=
Southfield, MI 48034	വ ജ
City/State and Zip Code	Ü
invoices@bluerockmi.com	
E-mail address: (to be used for future annual report notification)	•
For further information concerning this matter, please call:	
Chris Vohs 248 , 226-5700	
Name of Contact Person Area Code Daytime Telephone Number	

Enclosed is a check for the following amount:

MAILING ADDRESS:

Division of Corporations

Registration Section

Tallahassee, FL 32314

P.O. Box 6327

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status

ing Fee & 🗓 \$155.00 Filing Fee & Certified Copy

STREET ADDRESS:

Registration Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

□ \$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:

FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE 1 BR CARROLL LANSBROOK, LLC	STATE OF FLORIDA:		
(Name of Foreign Limited Liability Company; must include "Limited Liability C	ompany," "L.L.C.," or "LLC.")		
(If name unavailable, enter alternate name adopted for the purpose of transacting business in F Liability Company," "L.L.C," or "LL.C.")	lorids. The alternate name must incl	ude "Limited	
2 Delaware 3. 46-48604	1		
(Jurisdiction under the law of which foreign limited liability company is organized)	ability (FEI number, if applicable)		
4 Upon qualification		20	
(Date first transacted business in Florida, if prior to regis (See sections 605.0904 & 605.0905, F.S. to determine pena	tration.) Ity liability)	Z ·	
, 712 Fifth Avenue, 9th Floor	122 (T) - * 7 () = 7 () =	20 parat	
New York, NY 10019		7	
(Street Address of Principal Office)		TRE TO	
6. 712 Fifth Avenue, 9th Floor		& English	
New York, NY 10019	Şn	Ci Ci	
(Mailing Address)			
7. The name, title or capacity and address of the person(s) who has/ha	ve authority to manage is/a	ге:	
BR Lansbrook JV Member, LLC , AMBR	, -		
27777 Franklin Road, Ste. 900			
			
Southfield, MI 48034			
8. Attached is an original certificate of existence, no more than 90 days having custody of records in the jurisdiction under the law of which it is acceptable. If the certificate is in a foreign language, a translation of the must be submitted)	organized. (A photocopy	is not	
Cath			
Signature of an authorized personance with section 605,0203, F.S., the execution of this document constitutes an affirmation under an aware that any false information submitted in a document to the Department of State constitutes a third	r the penalties of perjury that the facts s	tated herein are true. 155, F.S.)	
Chris Vohs, Authorized Person			
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.

	of the Limited Liability	• -		
If unavailable	e, the alternate to be used	d in the state of Florida is:		
2. The name	and the Florida street ac	idress of the registered agent and office are:	2014 MAR RECENETA	, ; },
NRAI Services, Inc.		R -7	E-1847.EE	
		(Name)		[;
1200 South Pine Island Road			E Marie	
•	Florida St	reet Address (P.O. Box NOT ACCEPTABLE)	— 5 3	
	Plantation	FL 33324		
		Clty/State/Zip		

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 605, Florida Statutes.

(Signature)

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

Delaware

PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BR CARROLL LANSBROOK, 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 FOURTH DAY OF MARCH, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BR CARROLL LANSBROOK, LLC" WAS FORMED ON THE TWELFTH DAY OF FEBRUARY, A.D. 2014.

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

5481346 8300

140281326

at corp.delaware.gov/suthwer.shtml

AUTHENTICATION: 1175482

DATE: 03-04-14