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2014 MAR 31 PM 1:54 SECRETARY OF STATE

K.SALY EXAMINER APR - 8 2014

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: PGA Partners 100, LLC						
Name of Limited Liability Company .						
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certifica Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida,	te of orida					
Please return all correspondence concerning this matter to the following:						
Patricia Harris						
Name of Person						
Allied Capital and Development of South Florida, LLC						
Firm/Company						
1295 US Highway 1						
Address						
N Palm Beach, Florida 33408						
City/State and Zip Code						
pat@acdofsouthflorida.com						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Patricia Harris 561 983-4465						
Name of Contact Person Area Code Daytime Telephone Number						
MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations						
Registration Section Registration Section						
P.O. Box 6327 Clifton Building						
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301						
Enclosed is a check for the following amount: □ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$160.00 Filing Fee, 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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Liability Company," "L.L.C," or "LLC.") 2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 4. N/A (Date first transacted business in (See sections 605.0904 & 605.0905) 5. 1295 US Highway 1	Florida, if prior to registration.) F.S. to determine penalty liability)
(Jurisdiction under the law of which foreign limited liability company is organized) 4. (Date first transacted business in (See sections 605.0904 & 605.0905	(FEI number, if applicable)
(Date first transacted business in (See sections 605,0904 & 605,0905	Florida, if prior to registration.) F.S. to determine penalty liability)
(See sections 605.0904 & 605.0905	Florida, if prior to registration.) F.S. to determine penalty liability)
_{5.} 1295 US Highway 1	
	是 表
N. Palm Beach, FL 33408	SSET
	s of Principal Office)
_{6.} 1295 US Highway 1	(0) is
N. Palm Beach, FL 33408	ا واست موجه
(Maili	ng Address)
7. The name, title or capacity and address of the personal states of	son(s) who has/have authority to manage is/are:
Nicholas A. Mastroianni, II, Manage	er
	nore than 90 days old, duly authenticated by the official law of which it is organized. (A photocopy is not a translation of the certificate under oath of the translator

Nicholas A. Mastroianni, II, 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.

1.	The name o	f the Limit	ed Liability	Company is:
	O 4 D -		400 11	\sim

PGA Partners 100, 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 office are:

Donald M. Allison, Esquire

(Name)

33 Southeast Fifth Street, Suite 100

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Boca Raton

33432

City/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 Filing 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 "PGA PARTNERS 100, 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-SEVENTH DAY OF MARCH, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PGA PARTNERS 100, LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF APRIL, A.D. 2013.

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

5325612 8300

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AUTHENTYCATION: 1244584

DATE: 03-27-14

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