Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

RE-SUBMIT

From:

Email Address:

Account Name

Fax Number

: C T CORPORATION Sefes In Oliginal Ting : FCA000000023 (850) 222-1092 date of submission 4/16

Phone

Account Number : FCA00000023

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

Foreign Limited Liability Company LMC BOCA CITY WALK DEVELOPER, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03-5
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help B. BOSTICK

APR 1 8 2014

EXAM/16/2014

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA SE FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT	CATUTES, THE FOLLOWING IS SUBMIT PRINTERS IN THE STATE OF ME ORDA	TIED TO REGISTER A
LMC Boca City Walk Developer, LLC		
(Name of Foreign Limited Liability Company; must inch	ide "Limited Liability Company," "L.L.C.," or "L	
(If name unavailable, enter alternate name adopted for the purpose of tr Liebility Company," "L.L.C," or "LLC.")	unsacting business in Florida, The afternate name	must include "Limited
	_{3.} 46-5389484	S
(Jurisdiction under the law of which foreign limited liability company is organized)	(FBI number, if applicable)
4. (One first trensported business in	Florido Marios to registration	
(Date first transacted business in (See sections 605.0904 & 605.0905, 5. 700 N.W. 107th Avenue, St		23170
3. 100 W.W. 107 HI Avender, O.	alto 400, Milatti, i L.	
(Stroet Address	of Principal Office)	
6. 700 N.W. 107th Avenue, Su	iite 400, Miami, FL 3	33172
<u></u>		•
(Malla	og Address)	•
7. The name, title or capacity and address of the pers	•	•
Lennar MF Holdings, , 700 N.W. 107t	h Avenue, Sulte 400, Mlami,	FL 33172, Manage
		·
·		
8. Attached is an original certificate of existence, no n	nore than 90 days old, duly authentics	ted by the official
having custody of records in the jurisdiction under the acceptable. If the certificate is in a foreign language, a must be submitted)	law of which it is organized. (A photo	locopy is not
	700	
Signature of ar	a authorized person	•
(by accordance with scaller \$05.0203, P.S., the execution of this document coust am aware that key false information submitted in a document to the Department	litites an affirmation under the penalties of perjusy that	the facts stated herein are true. I r in s.817.155, F.S.)
Mark Sustana		•
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 Limited Liability Com	pany is:	
LMC BOCA CIT	Y WALK DEVELOPER, LLC		
If unavailable,	the alternate to be used in th	e state of Florida is:	
2. The name a	nd the Florida street address	of the registered agent and office a	re:
	C T Corporation System		
		(Name)	
	1200 South Pine Island Road		
	Florida Street Ad	dress (P.O. Box NOT ACCEPTABLE)	
	Plantation	FL 33324 City/State/Zip	
liability compar registered agen statutes relating	ny at the place designated in t and agree to act in this cap to the proper and complete	to accept service of process for the a this certificate, I hereby accept the a acity. I further agree to comply with performance of my duties, and I am stered agent as provided for in Chap	ppointment as the provisions of all familiar with and
<u>:</u>	C T Corporation System By: (Sign	attire)	Angei Nunez Assistant Secretary
	\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Designation of Registered Agen Cortified Copy (optional)	t

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LMC BOCA CITY WALK DEVELOPER, 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 SIXTEENTH DAY OF APRIL, A.D. 2014.

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

5515709 8300

AUTHENTICATION: 1298563

DATE: 04-16-14

850-817-6381

4/17/2014 10:42:11 AM PAGE 1/001 Fax Server



April 17, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: LMC BOCA CITY WALK DEVELOPER, LLC

REF: W14000024474

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.

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.

Barbara Bostick Regulatory Specialist II FAX Aud. #: H14000091456 Letter Number: 314A00008261

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SECHEM CHOME

RE-SURMIT
Please relation and filling
date of submission 4/16