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Division of Corporations

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From:

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Phone Fax Number : (850)222-1092 : (850)878-5368

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Foreign Limited Liability Company URBAN COMMONS HIALEAH, LLC

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APR 1 8 2014

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COVER LETTER

	stration Section ion of Corporations			
SUBJECT:	Urban Commons Hialcah, LLC			
_	Name	of Limited Liability Company		
	"Application by Foreign Limited Liabi I check are submitted to register the ab			
Please return (all correspondence concerning this mai	tter to the following:		
	Debbie Secard			
	•	Name of Person		2014 EPR 17 SECRETAN TALLAHASS
	Shorry Meyerhoff Hanson & Cran	ce LLP		1.5 Th
		Pirm/Company		- Find - 20
	610 Newport Center Drive, Suite	1200		يسم سخر
		Address		PER STA
	Newport Beach, CA 92660			TVATE CTVATE
		City/State and Zip Code		5 m
	dsecard@calawyers.com			
	formation concerning this matter, plea		•	
Deb	bie Secard	at (949	719-1200	
	Name of Contact Person	Area Codo	Daytime Telephone Number	
Divi Regi P.O.	ILING ADDRESS: sion of Corporations istration Section Box 6327 shasses, PL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circ Tallahassee, FL 32301	ile ·	
	a check for the following amou 125.00 Filing Pee \$\square\$ \$\square\$ \$130.00 Filin Certificate of	ng Pec & 🛮 \$155.00 Piling		

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:

Florida. The alternate name must include "Li	miled
(PEI number, if applicable)	_
For	201
distration.) nully liability)	2014 FPR
5-1	- 20
	1
	_ <u>F</u>
	_ =
310	
nave authority to manage is/are:	_
	· >=

Taylor Woods, Managing Member of Urban Commons, LLC, Managing*
Typed or printed name of signee

*Member of Urban Commons Hialeah, LLC

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 nam	e of the Limited Liability Compar	ay is:	
Urban Com	mons Hialeah, LLC		
If unavailab	le, the alternate to be used in the	state of Florida is:	
2. The nam	e and the Florida street address of	f the registered agent and office are:	Var. 1
	C T Corporation System		
		(Name)	A A S
	1200 South Pine Island Road		mo.
	Plorida Street Addr	ess (P.O. Box NOT ACCEPTABLE)	
	Plantation	FL 33324	高州 (
		City/State/Zip	<i>y-</i>
liability con registered a statutes rela	npany at the place designated in th igent and agree to act in this capa iting to the proper and complete p	o accept service of process for the above stails certificate, I hereby accept the appointm city. I further agree to comply with the pro erformance of my duties, and I am familiar tered agent as provided for in Chapter 605	nent as ovisions of all with and
	C T Corporation System By:	Nicole Charimonal	
	(Signa	ture)	
	\$ 100.00 \$ 25.00 \$ 30.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional) Certificate of Status (optional)	

Delaware

DAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "URBAN COMMONS HIALEAH, 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.

5512133 8300

140481728

You may vorify this contificate onling

jeffrey W. Buttock, Secretary of State

DATE: 04-16-14