Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCAC00000023 Phone : (850)222-1092 Fax Number : (850)878-5368

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

Email	Address:		
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Foreign Limited Liability Company Florida Woodlake LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

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Corporate Filing Menu

Help

B. BOSTICK

APR 2 4 2014

FXAM4/23/2014

COVER LETTER
TO: Registration Section Division of Corporations
SUBJECT: Florida Woodlake LLC
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate 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:
Lou Ann Morse
Name of Person
Aspen Square Management, Inc.
Firm/Company
380 Union St., Suite 300
Address
West Springfield, MA 01089
City/State and Zip Code
lou_ann_morse@aspensquare.com
E-maj) address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Lou Ann Morse Name of Contact Person Area Code Daytime Telephone Number
Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 Control of Corporations STREET ADDRESS: Division of Corporations Registration Section Clifton Building Tallahassee, FL 32314 Tallahassee, FL 32301
Enclosed is a check for the following amount:

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Florida Woodlake LLC (Name of Foreign Limited Liability Company: must include "Limited Liability Company." L.L.C."	or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate this billing Company, "L.L.C." or "LLC.")	name must include "Lim	nited
2 Delaware 3 41/2= 511/2	10 16	
(Jurisdiction under the law of which foreign limited liability (FEI number, if application under the law of which foreign limited liability)	cable)	•
4	····	
(Date flist transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 5. 380 Union St., Suite 300		_
West Springfield, MA 01089		
(Street Address of Principal Office) 6. SAME AS ABOVE		•
(Mailing Address)	<u> </u>	-
•	- In.	
7. The name, title or capacity and address of the person(s) who has/have authority to r Nepsa Manager LLC, Manager)	
380 Union St., Suite 300	-,,,,	•
West Springfield, MA 01089	10 LU 10 TO	-
8. Attached is an original certificate of existence, no more than 90 days old, duly authorized flaving custody of records in the jurisdiction under the law of which it is organized. (A acceptable. If the certificate is in a foreign language, a translation of the certificate under must be submitted) Signature of an authorized person the section 505.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjuant aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided.	photocopy is not er oath of the trans	siator
Fred Anthony, President of Nepsa Property Investors, In	nc.	

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 of the Limited Liability of Florida Woodlake LLC	• •			
If unavailable, the alternate to be used	in the state of Florida is:			
2. The name and the Florida street add	iress of the registered agent and office are			
C T Corpora	tion System	.*•		
	(Name)		• • • • •	ii
1200 South	Pine Island Road	•	: 	
Florida Stre	Florida Street Address (P.O. Box NOT ACCEPTABLE)			
Plantation	FL 33324		م دري	
	City/State/Zip		. M	

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.

Connie Began

\$ 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 "FLORIDA WOODLAKE 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-THIRD DAY OF APRIL, A.D. 2014.

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

5520284 8300

140505779

You may vorify this certificate caling

Jeffrey W. Bullock, Secretary of State

DATE: 04-23-14