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Special Instructions to Filing Officer:				
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ACCOUNT NO. : I2000000195 REFERENCE : 212780 7113235 AUTHORIZATION : COST LIMIT ORDER DATE : July 11, 2014 ORDER TIME : 4:13 PM ORDER NO. : 212780-010 CUSTOMER NO: 7113235 FOREIGN FILINGS NAME: ARP 2014-1 BORROWER, LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN STAMPED COPY ____ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Emily Gray -- EXT# 62925

EXAMINER:

COVER LETTER

D	APP 2014-1 Rorrowor LLC	
SUBJECT	REP 2014-1 Borrower, LLC Name of Limited Liability Company	
	sed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certification and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.	
Please retu	orn all correspondence concerning this matter to the following:	
	Name of Person	
	Corporation Service Company	
	Firm/Company	
	1201 Hays Street	
	Tallahassee, FL 32301	
	City/State and Zip Code	
	E-mail address: (to be used for future annual report notification)	
For further	r information concerning this matter, please call:	
F	Patricia B. Dietz Name of Contact Person Area Code Daytime Telephone Number	
	Name of Contact Person Area Code Daytime Telephone Number	
D R P.	AILING ADDRESS: Division of Corporations Division of Corporations Division of Corporations Registration Section C.O. Box 6327 Clifton Building Callahassee, FL 32314 Clifton Building Callahassee, FL 32301	
	I is a check for the following amount: I \$125.00 Filing Fee	

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: ARP 2014-1 Borrower, 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 name must include "Limited Liability Company," "L.L.C," or "LLC.") , Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) N/A (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 7047 E. Greenway Parkway Suite 350 Scottsdale, AZ 85254 (Street Address of Principal Office) 7047 E. Greenway Parkway Suite 350 Scottsdale, AZ 85254 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: 2014-SFR1 Equity Owner LLC, Sole Member 7047 E. Greenway Parkway Suite 350 Scottsdale, AZ 85254 8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Patricia B. Dietz

Typed or printed name of signee

Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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 (Company is:	
ARP 2014-1 B	•		
	, the alternate to be used	in the state of Florida is:	
		dress of the registered agent and office are:	
	Corporation Service Company		
	,	(Name)	
	1201 Hays Street		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		
	Tallahassee	32301 FL	
		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.

Corporation Service Company

By: (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 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ARP 2014-1 BORROWER, 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 ELEVENTH DAY OF JULY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ARP 2014-1 BORROWER, LLC" WAS FORMED ON THE SECOND DAY OF MAY, A.D. 2014.

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

5504907 8300

140945449

Jeffrey W Bullock, Secretary of State

AUTHENT CATION: 1528155

DATE: 07-11-14

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