Florida Department of State Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H140001867163)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

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:

Foreign Limited Liability Company 1500 N. Orange Homes, LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$125.00 |

Electronic Filing Menu Corporate Filing Menu

Help

8/7/2014

ф

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 REGIST | ER A | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------|------------|
| FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: | | | |
| 1, 1500 N. ORANGE HOMES, 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 Florids. The alternate name must include "Limi Liability Company," "LLC," or "LLC,") | ied | | |
| , Delaware | | | |
| 2 Delaware (Fill number, if applicable) (Fill number, if applicable) | | | |
| 4 | | | |
| (Date first transacted business in Florids, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) | ==== | ~ | |
| 917 Tahoe Boulevard, Suite 200 | | 7118 | • |
| Incline Village, NV 89451 | | AUG | <u> </u> |
| (Street Address of Principal Office) | | -7 | ŗ |
| Same as above | يوادا | | Ш |
| | 77.00 | = | \bigcirc |
| (Mailing Address) | 유로 | œ | |
| fragging company | 등등 | 24 | |
| 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: | T.> | - | |
| Nathan A. Horvath, Manager, 917 Tahoe Blvd., Ste. 200, Incline Village, NV 89451 | | | |
| Peter M. Castleman, Manager, 917 Tahoe Blvd., Ste. 200, Incline Village, NV 89451 | | | |
| Mark J. Sullivan, Manager, 1700 H Street, NW, Washington, DC 20006 | | | |
| 8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the offlic 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 eath of the transl must be submitted) Signature of an authorized person (In accordance with seation 602.0203, F.S., the execution of the decimant constitutes as affirmation under the possibles of perjuty that the facts stated herele | aior | | : |
| am aware that any false information submitted in a document to the Department of Siste constitutes a third degree felting as provided for in a 217.135, P.S.) | | | |
| Timed or printed name of stores | | | |

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 th | ne Limited Liabilit | y Company is: | |
|--------------------------------------------------|-----------------------|-------------------------------------------------|-----------------|
| 1500 N. Oran | nge Homes, LL | c | |
| If unavailable, the | alternate to be us | ed in the state of Florida is: | |
| 2. The name and | the Florida street | address of the registered agent and office are: | -1.0 2 |
| N | RAI Services | , Inc | 書 |
| _ | | (Namo) | हैं है न |
| J | 200 South Pine Island | Road | 第二十二 |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) | | ## E C | |
| P | lantation | FL 33324 | 8: 24 1.080) |
| _ | | 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 "1500 N. ORANGE HOMES, 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 SIXTH DAY OF AUGUST, A.D. 2014.

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

5575025 8300

141043905

You may worify this certificate online at Corp. delaware. gov/authvor. shtml

Jeffrey W. Bullock, Secretary of State

AUTHENTACATION: 1600658

DATE: 08-06-14