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155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

8/20/14

NAME: SAVORY REALTY LLC

TYPE OF FILING: APPLICATION

COST:

155.00

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

SUBJECT:	Savoy Realty LLC	
3010/2011	None of Limited Liability Company	
The enclosed "Application by Foreign Lie Existence, and check are submitted to reg	nited Liability Company for Authorization to Transact Business in Florids,* Certificate of ister the above referenced foreign limited liability company to transact business in Floride.	f h
Please return all correspondence concerni	ng this matter to the following:	
	Tara Morales	
	Name of Person	13
	• • • • • • • • • • • • • • • • • • • •	City
	Capitol Services - Corporate Filings Team	
<u> </u>	Firm/Company	2014 1006
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	800 Brazos Ste 400	ζ O
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	Austin TX 78701	
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rchos	id@chosidlaw.net	
	il address: (to be used for future annual report notification)	
For further information concerning this ma	iter, please call:	
Tara Morales	nt (800) 345-4647	
Name of Contac		
MAILING ADDRESS;	STREET ADDRESS:	
Division of Corporations	Division of Corporations	
Registration Section	Registration Section	
P.O. Box 6327	Clifton Bullding	
Tallahasses, FL 32314	2661 Executive Center Cirolo	
	Talinhassee, FL 32301	

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

IN COMPLIANCE WITH SECTION 605.0802, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. Savoy Realty LLC (Name of Foreign Limited Linbility Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (Hname unavailable, anter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liebility Company," "L.L.C," or "LLC.") 2 DE (Date first transacted business in Plorida, if prior to registration.)
(See sections 605,0904 & 605,0905, F.S. to determine penelty liability) 5 5550 Glades Road, Suite 200 Boca Raton, FL 33431 (Street Address of Principal Office) 6 5550 Glades Road, Sulte 200 Boca Raton, FL 33431 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Richard G. Chosid, Esq., Chairman Board of Managers 5550 Glades Road, Suite 200 Boca Raton, FL 33431 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) 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 automitted in a document to the Department of State constitutes a third degree felony as provided for in 1.817.155, F.S.) Richard G. Chosid, Esq. 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.

Savoy Realty LLC	
If unavailable, the alternate to be used in the state of Florida is:	7.4 7.00 1.00
2. The name and the Florida street address of the registered agent and office are:	
Capitol Corporate Services, Inc. (Namo)	7 C
155 Office Plaza Dr. Ste A Florida Street Address (P.O. Box NOT ACCEPTABLE)	<u> </u>
Tallahassee FL 32301 City/State/Zlp	

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.

Cayle Windle, Asst. Secretary on behalf of Capitol Corporate Services, Inc.

\$ 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 "SAVOY REALTY 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 TWENTIETH DAY OF AUGUST, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SAVOY REALTY LLC" WAS FORMED ON THE TWENTIETH DAY OF AUGUST, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

5386219 8300

141090402

AUTHENTICATION: 1634359

DATE: 08-20-14

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