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EXAMINER

COVER LETTER

TO:

Registration Section Division of Corporations

SHRIECT: N

Newport Fort Lauderdale Management, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of 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:

. rease retain an extrespondence e	oncerning and ma	iter to the r	one mag.					
Lisa E.	Bubczyk	<						
		Nar	ne of Person			<u> </u>		
David, I	Kamp &	Franl	k, L.L.C.					
		Fin	n/Company					
739 Thi	mble Sh	oals	Bouleva	rd, S	uite 10	5		
			Address					
Newpor	t News,	VA 2	23606					
		City/Sta	te and Zip Code		.			
shawnb	@nhgho						2714	
For further information concerning			for future annual repo	ort notifica	ition)		8- 438	
Lisa Bubcz	yk		757 at (5)	595	-4500	-14 -14 -14 -14	T	
Name o	f Contact Person		Area Code	Day	time Telephone N	lumber :	ի ()։	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, Fl. 32314		Division Registrat Clifton B 2661 Exe	F ADDRESS: of Corporations ion Section suilding ecutive Center Circ see, FL 32301	·le		70 M	0 _C	
Enclosed is a check for the for the formula \$125.00 Filing Fee	ollowing amount \$130.00 Filing Certificate of	g Fee &	■ \$155.00 Filing Certified Copy		□ \$160.00 Fill of Status &	_		

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:

Newport Fort Lauderdale Management, 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 Florido. The alternate name must Liability Company," "L.L.C," or "LLC.")	include "Limited
_{2.} Virginia _{3.}	
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	
4. (Date first transacted business in Florida, if prior to registration.)	
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. 4290 New Town Avenue	
Williamsburg, VA 23188	
(Street Address of Principal Office)	
6. 4290 New Town Avenue	· · · · · · · · · · · · · · · · · · ·
Williamsburg, VA 23188	
(Mailing Address)	· · · ·
7. The name, title or capacity and address of the person(s) who has/have authority to manage	
Michael L. Pleninger, Manager of MLP Manager, LLC, the Mar	nager 📜 📜
of Newport Fort Lauderdale Management, LLC	
	<u>JA 9</u>
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated having custody of records in the jurisdiction under the law of which it is organized. (A photocoacceptable. If the certificate is in a foreign language, a translation of the certificate under oath of must be submitted)	py is not
Signature of an authorized person (In accordance with section 605,0203, F.Y., the execution of this document constitutes an affirmation under the penalties of perjury that the firm aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.	
Michael L. Pleninger, Manager	
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.

	of the Limited Liability Cor Fort Lauderdal	e Management, LLC	
If unavailable,	the alternate to be used in	the state of Florida is:	
2. The name a	nd the Florida street addres	es of the registered agent and office are:	· · · · · · · · · · · · · · · · · · ·
	CT Corporatio		
	SEP		
	Plantation	FL 33324 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.

Judith Argao
Vice President

and Assistant Secretary

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Commonboealth of Hirginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

That Newport Fort Lauderdale Management, LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is August 27, 2014; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: August 27, 2014

Joel H. Peck, Clerk of the Commission

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