Page 1 of 1



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.

(((H140002166973)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Phone : (850)222-1092

Fax Number

: (850)878-5368

Account Name : C T CORPORATION STEM CO TO THE CONTROL OF THE CONTR date of submission glis

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 Stonehenge Community Development 102, LLC

Certificate of Status	0
Certified Copy	_0
Page Count	9506
Estimated Charge	\$125.00

SEP 1 7 2014

S. YOUNG

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Help

850-617-6381

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September 16, 2014

FLORIDA DEPARTMENT OF STATE Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: STONEHENGE COMMUNITY DEVELOPMENT 102, LLC

REF: W14000056423

We have received your document for STONEHENGE COMMUNITY DEVELOPMENT 102, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned. 医路

If you have any questions concerning the filing of your document, pleases

FAX Aud. #: H14000216697

Letter Number: 614A00019757

Shelia E Young Regulatory Specialist II

133

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SEP 16

Amount_charged: 125.00 50

Please roich crigit

date of submission 9/15

COVER LETTER

	Registration Section Division of Corporations	•					
SUBJEC	T; Stonehenge Commun	nity Development 102, LL	С				
		Name of Limits	ed Linbility Company	i			
The enclo Existence	osed "Application by Fore c, and check are submitted	ign Limited Liubility Com to register the above refer	pany for Authoriza reneed foreign timit	tion to Trans ted liability (sact Business in Florid company to transact b	ia," Certific usiness in F	ale of lorida
Please re	turn all correspondence co	nceming this matter to the	following:				
	John P. Witten						
		N	lame of Person				
	* Stonellenge Capit	al Company, LLC					
	<u> </u>	F	inivConspany		· 	_	
	191 W. Nationwie	de Blyd., Suite 600					
			Address			_	
	Columbus, Off 4	3215					
		Citye	itale and Zip Code	··			
	memakuch@stone						
	<u></u>	E-mail address: (to be use	d for litture amual re	port notifical	on)	-	
For lunk	er information concerning	this matter, please call:				ALCA MCSI	F S
	Michele Makuch		at (614	246-2456	1		T T
•	Name of	Contact Person	Area Code	Dayti	ine Telephone Number	7/2	15
	MAILING ADDRESS:	STRE	ET ADDRESS;				. :
Ī	Division of Corporations		n of Corporations			12_{10}	達 (T) 〒 5
	Registration Section		ation Section			3	
	P.O. Box 6327		Building			~진소#	
	Tallahassee, FL 32314		xecutive Center Cit 18500, FL 32301	rcle		F.	\$
Enclose	d is a check for the fo	llowing amount:					
		St30.00 Filing Fee & Certificate of Status	D \$155,00 Min Certified Cop		□ \$160.00 Filing Fee of Status & Certifi		•

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:

1. Stonehenge Community Development 102, 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 ulternate na Liability Company," "L.L.C," or "LLC,")	me must include "Limited
2. Delaware 3. 46-1783814	
(Fill number, if applied company is organized)	ble)
4. (upon filing)	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. 191 W. Nationwide, Blvd., Suite 600, Columbus, Oll 43215	
(Street Address of Principal Office)	
6. 191 W. Nationwide Blvd., Suite 600, Columbus, OH 43215	
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to me	anage lavare:
Thomas J. Adamek, President, 236 Third Street, Baton Rouge, LA 70801	<u> </u>
John P. Witten, Secretary, 191 W. Nationwide Blvd., Suite 600, Columbus, OH 43215	2巻 あに
Barry G. Gowdy, Treasurer, 191 W. Nationwide Blvd., Suite 600, Columbus, Ol1 43215	
8. Attached is an original certificate of existence, no more than 90 days old, duly authent	
having custody of records in the jurisdiction under the law of which it is organized, (A p	
acceptable. If the certificate is in a foreign language, a translation of the certificate under must be submitted)	oath of the translator
On Rise	
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 aim aware than any false information submitted in a document to the Department of State constitutes a third degree follows as provide.	
John P. Witten	•
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 Liabili	ity Company is:	
Stonchenge Cor	minunity Development 10	12, LLC	
If unavailable	the alternate to be us	sed in the state of Florida is:	
2. The name	and the Florida street	address of the registered agent and office are:	
	C T Corporation Syste	iem	
		(Name)	
	1200 South Pine Islan	nd Road	
	Florida	Street Address (P.O. Uox NOT ACCEPTABLE)	
	Plantation	FL 33324 SE	
		City/State/Zip	i
liability comp registered age statutes relati	any at the place design ent and agree to act in ng to the proper and c	gent and to accept service of process for the above stated limited mated in this certificate, I hereby accept the appointment as it this capacity. I further agree to comply with the provisions of all complete performance of my duties, and I am familiar with and mas registered agent as provided for in Chapter 605, Florida.	
	C T Corporation S By:	(Signature W + Bold	
		\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)	

S 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 "STONEHENGE COMMUNITY DEVELOPMENT 102, 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 FIFTEENTH DAY OF SEPTEMBER, A.D. 2014.

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

SEPTIME STATE

5270476 8300

141179240

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

AUTHENTY CATION: 1697810

DATE: 09-15-14