Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H14000235142 3)))



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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 Little Basin Villas, LLC

Certificate of Status	0
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Page Count	06 1
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October 8, 2014

FLORIDA DEPARTMENT OF STATE Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: LITTLE BASIN VILLAS, LLC

REF: W14000061366

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

We can't file the foreign LLC until the Florida LLC has been dissolved.,

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

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Agnes Funt # 40

FAX Aud. #: H14000235142 Letter Number: 014A00021528

Regulatory Specialist II

P.O BOX 6327 - Tallahassec, Florida 32314

Little Basin Villas, LLC 88521 Overseas Highway Tavernier, FL 33070

CONSENT TO USE OF NAME

Little Basin Villas, LLC, a limited liability company organized under the laws of Florida, hereby consents to the registration of Little Basin Villas, LLC, a limited liability company formed and existing the State of Delaware, to be registered as a foreign limited liability company in the State of Florida with the ability to operate and exist in in Florida and to the use of the name "Little Basin Villas, LLC" in the State of Florida. This letter shall confirm and certify that Little Basin Villas, LLC organized under the laws of Florida will be terminated shortly with no intention to revive the entity or use the name Little Basin Villas, LLC in the State of Florida.

IN WITNESS WHEREOF, the said Little Basin Villas, LLC has caused this consent to be executed by the undersigned this 6th day of October, 2014.

Little Basin Villas, LLC

By: Ruchard Whu worl

Manager

COVER LETTER

	1				
SUBJECT: Little B	asin Villas, LLC		Liability Company		
			• • • • • •		
				ion to Transact Bosiness in Fl ed liability company to transac	
Please return all corre	spondence concerning this u	nater to the fi	ollowing:		ZEH OCT
Alle	n Wood				
·		Nun	ne of Person		,
Liul	e Basin Villas Management,	, LLC			7
		Pirn	VCompany		
					- 일째 😘
8852	11 Oversens Highway		Address		<u> </u>
			Madexs		4.
Tave	emier, Ft. 33070				
		City/Stat	e and Zip Code		
Allen	W@keyslumber.com				
	E-mail polities	s: (to be used f	or future annual rep	ort notification)	
For further information	n concerning this moner, ple	nse call;			
Allen Wood		•	ai (305	852.4300 x 201	
	Name of Connect Person		Area Code) 852.4300 x 201 Daytime Telephone Nord	ner
MAILING A Division of C Registration S P.O. Box 632 Tallahassee, 1	orporations Section 7	Division o Registrati Clifton B 2661 Exc	ADDRESS: of Corporations on Section uilding onlive Center Circ ee, FL 32301	ele	
Enclosed is a chect	c for the following amo	umt:			
⊠ \$125.00 Fi			□ \$155.00 Filing	Fee & S160.00 Filing 1	Fee, Certificate

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

IN COMPLIANCE WITH SECTION (05.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBARTIED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name m Liability Company," "L.L.C." or "LLC.")	ast include	"Limited
2. Delaware 3.		
(Fill number, if applicable) company is organized)	22 [] 13	2814
4. (Date first transacted business in Florida, if prior to registration.)		-
(See sections 605,0904 & 605,0905, F.S. to determine penalty liability)	1	
5 Little Basin Villas Management, LLC, 88524 Overseas Highway, Tavernier, Ft. 33070	0,3 to 1	7
J	[7] <u>(7)</u>	Jr- (
	1.84 1.84	
(Street Address of Principal Office)	617) ge ys _12	Ç.
6. Little Basin Villas Management, LLC, 88521 Overseas Highway, Tavernier, FL 33070	=	<u>ယ</u>
 The name, title or capacity and address of the person(s) who has/have authority to manag The Managers are (1) Bradley Waugh, 17 Edith Road, Narraganett, RI 02882, and 	e istate.	
(2)Allen Wood, as Manager of Little Basin Villas Management, LLC, 88521 Overseas Highway, Tavernier, Fi	_ 33070 ac	<u>1d</u>
(3) Bruce McClenithan, as Manager of Little Basin Villas Management, LLC, 88521 Overseas Highway, Tave	mier, FL	3302
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticate having custody of records in the jurisdiction under the law of which it is organized. (A photo acceptable. If the certificate is in a foreign language, a translation of the certificate under oath must be submitted) Signature of an authorized person the accordance with scenar 605,0203, F.S., the exception of this document constitutes at affirmation under the penalties of perjory that the major that may folke Information submitted in a decompant to the Department of State constitutes a third degree feloxy as provided for	copy is an afthe t	iot ranslator d bereiu are true.
Allen Wood, Manager of Little Basin Villas Management, LLC		

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 UNDERSKINED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name o	f the Limite	d Liability Company is:		
Little Basin Villa	s. t.l.C		· · · · · · · · · · · · · · · · · · ·	•
lf unavailable,	the alternat	e to be used in the state of Florida is:		
2. The name a	nd the Flori	da street address of the registered agent and office are:	40 T AL	
	Allen Wood	1		,
(Name)			·	
	88521 Over	seas Highway		į.,
		Florida Street Address (P.O. Box NOT ACCEPTABLE)	·	
	Tavernier	FL 33070		
		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)

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "LITTLE BASIN VILLAS, 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 SEVENTH DAY OF OCTOBER, A.D. 2014.

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

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141265207

You may vorify this cartificate online at corp. dolaware.gov/authvox.shtml

jeffrey W. Bullock, Secretary of State

DATE: 10-07-14