(1/5)

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Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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(((H14000254099 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Phone 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 Diversified Industrial Fund C, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu



COVER LETTER

	gistration Section vision of Corporati	out			
SUBJECT:	Diversified Indust	rial Fund C, LLC			
		Name of Lin	mited Liability Company		
The enclosed Existence, an	l "Application by Food check are submit	preign Limited Liability Co ted to register the above re	ompany for Authorization forenced foreign limited	to Transact Business in Florida," liability company to transact busin	Certificate of less in Florida.
Please return	all correspondence	concerning this matter to	the following:		
	Jan R. Ezeil, C	orporate Paralegal			
			Name of Person		
	Alston & Bird	LLP			
			Pirm/Company		
	1201 West Pea	chtree Street			
			Address		
	Atlanta, GA 30	309-3424			
		City	/State and Zip Code		
	roger.grier@bro	okfieldlogistics.com			
		E-mail address: (to be u	sed for future annual report	notitication)	
For further in	formation concernir	g this matter, please call:			
Jan R. Ezell			nt (404) 81	B1-7442	
	Name	f Contact Person	Area Code	Daytime Telephone Number	
MAI	LING ADDRESS:	. STR)	ERT ADDRESS:		
	ion of Corporations		ion of Corporations		
	tration Section Box 6327		tration Section n Building		
	hassee, FL 32314		n Dundung Executive Center Circle		
, , , , , ,	1111300, 1 21 32314		nassee, FL 32301		
Enclosed is	a check for the f	ollowing amount:	•		
	25.00 Filing Fee	☐ \$130.00 Filing Fee &	☐ \$155.00 Filing Foo		
		Certificate of Status	Certified Copy	of Status & Certifled C	ору

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:

		nacting business in Plotida. The alternate name must include "L
-laware _	3.	47-2207792
riediciler under the law of which foreign limited linbility impany is organized)		(Fkf number, if applicable)
pon registration		
(Pate first transacted bus (See sections 605,0904 & 6	iness in Flor 05.0905, P.S	orida, il prior to registration.) .S. 10 determine penalty liability)
100 Peachtree Street NE, Suite 1100, Atlanta, GA	0309	
(Street	Address of I	Principal Office)
00 Peachtree Street NB, Suite 1100, Atlanta, GA 30)309	
,		
	(Mailing A	Address
	/mming v	Autresty
he name, title or capacity and address of th	e person(n(s) who has/have authority to manage is/are:
trisi Davolopments International LLC (Managing I	Momber\ 1	1100 Penchtree Street NE, Suite 1100, Atlanta, GA-30309
the state of the s	,, 1	Trovi aminate direct trui, dute 1 lay, Stimins, Che 2000.
		<u>></u>
		2
		

Linds D. Booker, Tressurer of Industrial Developments International, LLC, its

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 Liabil	ity Company is:		
Diversified Inde	ustrial Fund C, LLC			
If unavailable	e, the alternate to be u	sed in the state of Florida is:		
2. The name	and the Florida street	address of the registered agent and office are:	ř	
	C T Corporation Syste	e m		
	· 	(Name)		
	1200 South Pine Islan	d Road		
	Florida	Street Address (P.O. Box NOT ACCEPTABLE)		
	Plantation	である。 FL 33324	8	د می در
		City/State/Zip	OCT 30	em ses garrei
liability compa registered ager statutes relatin	my at the place design nt and agree to act in t g to the proper and co	ent and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointment as whits capacity. I further agree to comply with the provisions of all implete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 605, Florida.	AH 7: 46	A STATE OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON ADDRESS OF T
	C T Corporation Sy By:	Michael Seraphin Asst. Secretary (Signature)		
		(AIRIGIEUA)		

Filing Fee for Application

Certified Copy (optional)

Designation of Registered Agent

Certificate of Status (optional)

\$ 100.00

\$ 25.00

\$ 30.00

5.00

Delaware

DACE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HERBBY CERTIFY "DIVERSIFIED INDUSTRIAL FUND C, 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 TWENTY-NINTH DAY OF OCTOBER, A.D.

2014.

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

14 OCT 30 AM 7: 46
SECRETARY OF STATE

5629557 8300

141344804

You may verify this certificate onlin at corp.delaware.gov/authver.shtml jeffrey W. Bullock, Secretary of State

THENTICATION: 1819466

DATE: 10-29-14