

12/5/2014 11:26 From: To: 850617-383

Division of Corporations

M14000008699

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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TALLAHASSEE, FLORIDA

To: Division of Corporations  
Fax Number : (850) 617-6383

\*REF. SUBMIT\*

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA0000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

12/3

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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RECEIVED  
14 DEC -5 AM 10:00  
DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

Foreign Limited Liability Company  
Outer Circle Apartments, LLC

Certificate of Status	0
Certified Copy	0
Page Count	06/8
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Outer Circle Apartments, 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:

Nadia Petrova

Name of Person

TCR

Firm/Company

3819 Maple Ave

Address

Dallas, TX 75219

City/State and Zip Code

npetrova@tcr.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nadia Petrova

Name of Contact Person

at ( 214 )

Area Code

922-8465

Daytime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

850-617-6381

12/5/2014 11:01:23 AM PAGE 1/001 Fax Server



December 5, 2014

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CT

SUBJECT: OUTER CIRCLE APARTMENTS, LLC  
REF: W14000072322

**\*RE-SUBMIT\***

Please return document to  
Gov. of Information 12/3

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

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

LLC's do not list general partners.

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.

Neysa Culligan  
Regulatory Specialist II

FAX Aud. #: H14000278617  
Letter Number: 814A00025517

RECEIVED

14 DEC -5 AM 10:00

DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

P.O BOX 6327 - Tallahassee, Florida 32314

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

**IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A  
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:**

1. Outer Circle Apartments, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 472400868

(FEI number, if applicable)

4. December 1, 2014

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 3819 Maple Ave

Dallas, TX 75219

(Street Address of Principal Office)

6. 3819 Maple Ave.

Dallas, TX 75219

(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

SCII 105 Crossroads, L.P., a Delaware limited partnership, its member

3819 Maple Ave, Dallas, TX 75219

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)

Nadia Petrova

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 submitted in a document to the Department of State constitutes a third degree felony as provided for in § 17.155, F.S.)

Nadia Petrova, Assistant Secretary

Typed or printed name of signee

FILED  
2014 DEC -3 AM 10:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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 Liability Company is:

Outer Circle Apartments, LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

C T Corporation System

(Name)

1200 South Pine Island Road

Florida Street Address (P.O. Box NOT ACCEPTABLE)

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.*

By: C T Corporation System

(Signature)

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

FILED  
2014 DEC -3 AM 10:38  
CLERK OF DISTRICT COURT  
PALM BEACH, FLORIDA

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OUTER CIRCLE APARTMENTS, 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 THIRD DAY OF DECEMBER, A.D. 2014.

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



5644194 8300

141478519

You may verify this certificate online  
at [corp.delaware.gov/authvar.shtml](http://corp.delaware.gov/authvar.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 1915577

DATE: 12-03-14

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "CROSSROADS APARTMENTS, LLC", CHANGING ITS NAME FROM "CROSSROADS APARTMENTS, LLC" TO "OUTER CIRCLE APARTMENTS, LLC", FILED IN THIS OFFICE ON THE SECOND DAY OF DECEMBER, A.D. 2014, AT 3:37 O'CLOCK P.M.



5644194 8100

141475364

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 1914910

DATE: 12-02-14

State of Delaware  
Secretary of State  
Division of Corporations  
Delivered 03:46 PM 12/02/2014  
FILED 03:37 PM 12/02/2014  
SRV 141475364 - 5644194 FILE

**STATE OF DELAWARE  
CERTIFICATE OF AMENDMENT**

1. Name of Limited Liability Company: Crossroads Apartments, LLC
2. The Certificate of Formation of the limited liability company is hereby amended as follows:

To change the entity name to Outer Circle Apartments, LLC

IN WITNESS WHEREOF, the undersigned have executed this Certificate on  
the 1st day of December, A.D. 2014.

By: Nadia Petrova  
Authorized Person(s)

Name: Nadia Petrova, Assistant Secretary  
Print or Type