Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA000000023
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\*\*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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Foreign Limited Liability Company UDRLP EAS LLC

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Corporate Filing Menu

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#### COVER LETTER

O:	Registration Section Division of Corporations			
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, , , , ,		Name of Limited	Liability Company	
The en Exister	closed "Application by Foreince, and check are submitted	gn Limited Liability Comp to register the above refere	any for Authorization to Transced foreign limited liability	ansact Business in Florida," Certify company to transact business in
lease	return all correspondence cor	ncerning this matter to the	following:	LAH ASS
		Na	me of Person	TO:
		Fir	m/Compeny	
	***************************************		Address	· · · · · · ·
		City/St	ate and Zip Code	
		E-mail address: (to be used	for future annual report notifi	cation)
For fu	rther information concerning		at()	
	Name of	Contact Person	Area Code D	aytime Telephone Number
١	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Division Registra Clifton 2661 E	TADDRESS:  of Corporations ation Section Building executive Center Circle ssee, FL 32301	
Encl	osed is a check for the fo	oilowing amount:		
	☐ \$125.00 Filing Fee	☐ \$130.00 Filing Fee &	☐ \$155.00 Filing Fee &	S160.00 Filing Pec, Certific

### 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: UDRLP EAS 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 alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") Delaware 2. Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 1745 Shea Center Drive, Suite 200 Highlands Ranch, CO 80129 (Street Address of Principal Office) 1745 Shea Center Drive, Suite 200 Highlands Ranch, CO 80129 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: United Dominion Realty, L.P., a Delaware limited partnership, its Sole Member 1745 Shea Drive Suite 200 Highlands Ranch, CO 20129 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) 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 penjury that the facts stated herein are true. am aware that any false information submitted in a document to the Department of State constitutes a third degree fellow as provided for in s.817.155, F.S.) Leslie B. Green 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.

	e of the Limited Liability	Company is:		14197	
If unavailab	19 22 X 2 X 2 X 2 X 2 X 2 X 2 X 2 X 2 X 2	H 8-03			
2. The name and the Florida street address of the registered agent and office are:					
C T Corporation System					
	_				
	<del></del>				
	Plantation	FL 33324			
	_				
Havine hee	n named as revistered as	City/State/Zip ent and to accept service of process for the above	e stated lim	rite	

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.

C T Corporation System

By:

(Signature)

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

# Delaware

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "UDRLP EAS 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 FIFTH DAY OF DECEMBER, A.D. 2014.

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

AUTHENTY CATION: 1928081 DATE: 12-05-14