

12/9/2014 10:10

From: 057673

(1/6)

Division of Corporations

Page 1 of 2

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**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

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To:

Division of Corporations
Fax Number : (350) 617-6383

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From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (350) 222-1092
Fax Number : (350) 878-5368

date of submission

12/8

****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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14 DEC -9 AM 10:00

**FLORIDA DEPARTMENT OF STATE
BUREAU OF CORPORATE
INFORMATION SERVICES**

**Foreign Limited Liability Company
Naples Leased Housing Development II, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	056
Estimated Charge	\$125.00

**SECRETARY OF STATE
RECEIVED**

2014 DEC -8 A 7:59

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Corporate Filing Menu

**B. BOSTICK
Help**

DEC 10 2014

EXAMINER

12/8/2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Naples Leased Housing Development II, 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:

John M. Stern
Name of Person

Winthrop & Weinstein, P.A.
Firm/Company

225 South Sixth Street, Suite 3500
Address

Minneapolis, MN 55402
City/State and Zip Code

oroskam@Dominiuminc.com
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

John M. Stern at (612) 604-6400
Name of Contact Person Area Code 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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 8 11:59 AM

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**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. Naples Leased Housing Development II, 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. Minnesota

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

3. _____

(FBI number, if applicable)

4. _____

(Date first transacted business in Florida. If prior to registration,
(See sections 605.0904 & 605.0903, F.S. to determine penalty liability)

5. 2905 Northwest Boulevard, Suite 150, Plymouth, MN 55441

(Street Address of Principal Office)

6. 2905 Northwest Boulevard, Suite 150, Plymouth, MN 55441

(Mailing Address)

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

Armand E. Brachman, 2905 Northwest Boulevard, Suite 150, Plymouth, MN 55441

(Chief Manager)

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 605.0903, 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 s.817.135, F.S.)

Armand E. Brachman, Chief Manager

Typed or printed name of signer

**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:

Naples Leased Housing Development II, 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:

CT Corporation System

(Name)

1200 South Pine Island Road

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

Plantation

FL 33324

City/State/Zip

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SECRETARY OF STATE
ALLIANCE OF FLORIDA

FILED

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: CT Corporation System

(Signature)

Michele Miller
Assistant Secretary

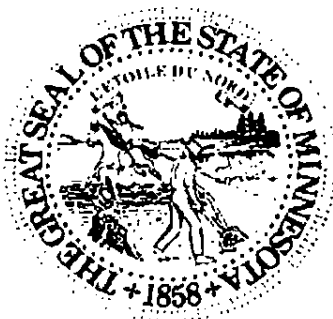
\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

**Office of the Minnesota Secretary of State
Certificate of Good Standing**

I, Mark Ritchie, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name:	Naples Leased Housing Development II, LLC
Date Filed:	12/04/2014
File Number:	797432300029
Minnesota Statutes, Chapter:	322B
Home Jurisdiction:	Minnesota

This certificate has been issued on: 12/08/2014



Mark Ritchie
Mark Ritchie
Secretary of State
State of Minnesota

SECRETARY OF STATE
MINNESOTA

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12/9/2014 10:52:41 From: To: 8506176383

(2/6)

850-617-6381

12/9/2014 10:23:18 AM PAGE 1/001 Fax Server



December 9, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION SYSTEM

RE-SUBMIT

SUBJECT: NAPLES LEASED HOUSING DEVELOPMENT II, LLC
REF: W14000073225

Date of submission 12/8

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).

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.

Barbara Bostick
Regulatory Specialist II

FAX Aud. #: H14000282745
Letter Number: 214A00025879

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DIVISION OF CORPORATIONS
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