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((	Requestor's Name)	
(,	Address)	<del></del>
(/	Address)	·
((	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT ☐ M	IAIL
(I	Business Entity Name)	
(1	Document Number)	_
Certified Copies	Certificates of Status _	<del></del>
Special Instructions t	to Filing Officer:	
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SECRETARY OF STATE DIVISION OF CORPORATIONS

DEC 16 2014
J. HARRIS

### **COVER LETTER**

TO: Registration Section Division of Corporations	
Woodbridge Ranches, LLC	
Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Existence, and check are submitted to register the above referenced foreign limited liability company to trans	Florida," Certificate of sact business in Florida
Please return all correspondence concerning this matter to the following:	
Jimmy McNutt	
Name of Person	
Woodbridge Ranches, LLC	
Firm/Company	
9900 SW 107 Ave Suite 103	
Address	
Miami, Florida 33176	
City/State and Zip Code	
yhernandez@shcommunities.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Yolanda Hernandez 305 971-0102	
Name of Contact Person Area Code Daytime Telephone Nu	mber
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	
	g Fee, Certificate Certified Copy

#### 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 FORFIGN I IMITED LIARII ITY COMPANY TO TRANSACT RI ISINESS. IN THE STATE OF FLORIDA

Woodbridge Ranches, 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 Liability Company," "L.L.C," or "LLC.")	include "	'Limited
2. State of Delaware 3. 47-2437524		
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		
4. Upon registration		
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		•
<sub>5.</sub> 9900 SW 107 Ave Suite 103	<u></u>	DI
Miami, Florida 33176	DEC	SECRE
(Street Address of Principal Office)  6. 9900 SW 107 Ave Suite 103	=	FILE TARY OF CO
Miami, Florida 33176	<del>70</del>	문 왕 왕
(Mailing Address)	2: 54	ATE ATE
7. The name, title or capacity and address of the person(s) who has/have authority to manage	•	<del>Z</del>
Jimmy McNutt, Manager		
9900 SW 107 Ave Suite 103		<del>.</del>
Miami, Florida 33176		<del></del>
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated having custody of records in the jurisdiction under the law of which it is organized. (A photocoacceptable. If the certificate is in a foreign language, a translation of the certificate under oath comust be submitted)	py is n	ot

ue. I

Jimmy McNutt, Manager

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.

Woodbridge Ranche		
If unavailable, the alternate to be us	sed in the state of Florida is:	
2. The name and the Florida street	address of the registered agent and office are	<del></del>
Jimmy McI	Nutt	SECRE JA DEC
<del></del>	(Name)	
9900 SW 1	107 Ave Suite 103	- CORPC
Florida	Street Address (P.O. Box NOT ACCEPTABLE)	<b>~</b> 3551
Miami	33186 FL	TIONS
	City/State/Zip	<del></del>

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)

# Delaware

PAGE 1

### The First State

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

DELAWARE, DO HEREBY CERTIFY "WOODBRIDGE RANCHES, 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-FOURTH DAY OF NOVEMBER, A.D. 2014.

5645385 8300

141447715

AUTHENTY CATION: 1893103

DATE: 11-24-14

You may verify this certificate online at corp.delaware.gov/authver.shtml