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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 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 PRS Co-Tenant (Springwood), LLC

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$125,00

Electronic Filing Menu Corporate Filing Menu

COVER LETTER

BJECT:	PRS Co-Tenant (Springwood), LLC	
WOLCE .	Nurs	ne of Limited Limbility Company
e enclosed istence, aw	"Application by Foreign Limited Liab I check are submitted to register the a	bility Company for Authorization to Transact Business in Florids," Certificate of above referenced foreign limited liability company to transact business in Florida.
ase return a	all correspondence concerning this mi	ster to the following:
	John Nolds	
		Name of Person
	Winthrop & Weinstine, P.A.	
		Firm/Company
	225 South Sixth Street, Suite 350	00
		Address SELL 2
	Minnespolis, MN 55402	City/State and Zip Code
		City/State and Zip Code
	eroskam@Dominiumino.com	. <u>9</u> 2 —
	E-mail address	s: (In be used for flitture annual report notification)
r Airther int	formation concerning this matter, pica	ase call: 57 A 5 5 5 5 5 5 604-6400 5 5 604-6400 5 604-6400
John	Nolde	
	Name of Contact Person	Area Code Daytime Telephone Number
	LING ADDRESS:	STREET ADDRESS:
	tion of Corporations	Division of Corporations
•	stration Section	Registration Section Clifton Building
	Box 6327 hassee, FL 32314	2661 Executive Center Circle
	in Boote, I to a 2, 1	Tallahassee, FL 32301

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:

Minnesota 3.	
41	
(FEI number, if applicable company is organized)	,
. (Dato first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
2905 Northwest Boulevard, Suite 150	
Plymouth, MN 55441	
(Street Address of Principal Office)	
2905 Northwest Boulevard, Suite 150	
Plymouth, MN 55441	
(Mailing Address)	20
. The name, title or capacity and address of the person(s) who has/have authority to man	age is/arc
See Attached	
	<u> </u>
•	
	- 9€ ∓
Attached is an original certificate of existence, no more than 90 days old, duly authenticating custody of records in the jurisdiction under the law of which it is organized. (A phoseceptable, If the certificate is in a foreign language, a translation of the certificate under or	SEE FLORIDA AND AND AND AND AND AND AND AND AND A
ust be submitted)	
Mild	
Signature of an authorized person	
accordance with section 605.0203; F.S., the execution of this document constitutes an affirmation under the penalties of perjucy the	t the facts stated herein are true. or in s.\$17.155, F.S.)

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.

	ne of the Limited Liability Company is:		
lf unavoilab	ble, the alternate to be used in the state of Florida is:		
2. The nam	ne 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 F1 33324		•
liability con registered a statutes rela	City/State/Zip City/State/Zip In named as registered agent and to accept service of process for the above stated limited impany at the place designated in this certificate, I hereby accept the appointment as suggest and agree to act in this capacity. I further agree to comply with the provisions of all atting to the proper and complete performance of my duties, and I am familiar with and abiligations of my position as registered agent as provided for in Chapter 605, Florida of Michele Nittle CT Corporation System CT Corporation System (Signature)	2014 DEC 31 AM 11: 58 2	

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

Armand E. Brachman – Co-Chief Manager

Paul R. Sween – Co-Chief Manager

Mark S Moorhouse – Senior Vice President

Jeffrey R Huggett – Vice President

Christopher P Barnes – Vice President

2905 Northwest Boulevard, Suite 150, Plymouth, MN 55441

TILED 2014 DEC 31 AM II: 58

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:

PRS Co-Tenant (Springwood), LLC

Date Filed:

12/30/2014

File Number:

802778900022

Minnesota Statutes, Chapter:

322B

Home Jurisdiction:

Minnesota

This certificate has been issued on:

12/31/2014



Mark Ritchie

Secretary of State State of Minnesota