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Page 1 of 1



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Division of Corporations

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Account Name : C T CORPORATION SYSTEM

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Foreign Limited Liability Company SE 2nd St (Edens), LLC

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MAR 1 6 2015

S. YOUNG

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Help

COVER LETTER

	istration Section sion of Corporation	15	
SUBJECT:	SE 2ND ST (EDEN	S) LLC	
		Name of Limited Liability Company	
The enclosed Existence, an	"Application by For d check are submitte	eign Limited Linbility Company for Authorization to Transact Business in Florida," Certificate of d to register the above referenced foreign limited liability company to transact business in Florida	
Piesse return	all correspondence of	concerning this matter to the following:	
	Durham T. Bon	ey	
		Name of Person	
	McNair Law Fir	ıв, Р.А	
		Firm/Company	
	1221 Main Stree	il, Suite 1800	
		Address	i
	Columbia, South	Carolina, 29201	_
	***************************************	City/State and Zip Code	N
	dboney@menair.	Carolina, 29201 City/State and Zip Code net E-mail address: (to be used for future annual report notification) g this matter, please call:	ン
		E-mail address: (to be used for future annual report notification)	
For further in	formation concerning	g this matter, please call:	
Durl	nam T, Boney	ai (803) 753-3288	
	Name o	Contact Person Area Code Daytime Telephone Number	
Divis Regis P.O.	LING ADDRESS: ion of Corporations stration Section Box 6327 hassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
	a check for the fo 25.00 Filing Fee	ollowing amount: ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy	

FL057 - 01/16/2014 Walters Khraer Online

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:

1. SE 2ND ST (EDENS), 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.")
2. South Carolina 3.
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to defermine penalty liability)
5. EDENS Limited Partnership
1221 Main Street, Suite 1000, Columbia, SC 29201 (Street Address of Principal Office)
·
6. Same as Above
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
The hame, this of capacity and address of the personal with his have admostly to manage in mo-
Edens Limited Partnership, Managing Member,
1221 Main Street, Suite 1000, Columbia, SC 29201
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)
AMM Ille
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 arm aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)
Jodie W. Mel nan Pg 5
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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 Compa	any is:	
SE 2ND ST (EI	DENS), LLC		
If unavailable	the alternate to be used in the	state of Florida is:	
2. The name	and the Florida street address o	of the registered agent and office are:	
	C T Corporation System		_
		(Name)	-
	1200 South Pine Island Road		 -
	Florida Street Add	ress (P.O. Box NOT ACCEPTABLE)	
	Plantation	F1, 33324 City/State/Zip	_
liability comp registered age statutes relati	any at the place designated in the ent and agree to act in this capa ng to the proper and complete p		itment as provisions of all ar with and
	\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional) Certificate of Status (optional)	FILED FILED FIRE 13 PM 12: 02 FIRE FLORD.

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

SE 2ND ST (EDENS), LLC, A Limited Liability Company duly organized under the laws of the State of South Carolina on March 9th, 2015, with a duration that is until December 31st, 2089, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-44-809 of the South Carolina Code, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 9th day of March, 2015.

Mark Hammond, Secretary of State