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T. Burch M. L. J. 7. 202

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE 587875 151903A
AUTHORIZATION Spelle Man
COST LIMIT : \$ 125.00
ORDER DATE: April 14, 2015
ORDER TIME : 11:03 AM
ORDER NO. : 587875-010
CUSTOMER NO: 151903A
FOREIGN FILINGS
NAME: 2504 LAGUNA TERRACE, LLC
XXXX QUALIFICATION (TYPE: <u>LL</u>)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Courtney Williams -- EXT# 62935



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 16, 2015

RESUBMIT

Please give original submission date as file date.

CORPORATION SERVICE COMPANY ATTN: COURTNEY WILLIAMS

SUBJECT: 2504 LAGUNA TERRACE, LLC

Ref. Number: W15000026349

We have received your document for 2504 LAGUNA TERRACE, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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.

Tim Burch Regulatory Specialist II

Letter Number: 115A00007558

DEPARTMENT OF STATE

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. 2504 Laguna Terrace, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C	C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternation that Liability Company," "L.L.C," or "LLC.")	ate name must include "Limited
_{2.} Nevada 3.	
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if a	pplicable)
_{4.} May 1, 2015	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	-1
5 6000 Monroe Road	28 5
Charlotte, NC 28212	PR PR
(Street Address of Principal Office)	SA OT THE
6 6000 Monroe Road	
Charlotte, NC 28212	E STATI
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to	o manage is/are:
Charles V. Ricks, Trustee, as Trustee of the JRH III Motorsports Trust, Manager of 2504	
6000 Monroe Road, Suite 100	
Charlotte, NC 28212	
8. Attached is an original certificate of existence, no more than 90 days old, duly authaving custody of records in the jurisdiction under the law of which it is organized. (acceptable. If the certificate is in a foreign language, a translation of the certificate unmust be submitted)	A photocopy is not
C. Y Brek	
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 person aware that any false information submitted in a document to the Department of State constitutes a third degree felony as pr	erjury that the facts stated herein are true. I rovided for in s.8!7.155, F.S.)
Charles V. Ricks, Trustee	

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

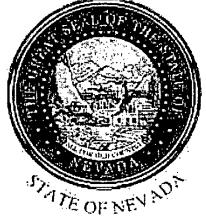
PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

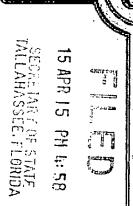
	e of the Limited Liability Comp.	any is:		_	
If unavailabl	e, the alternate to be used in the	state of Florida is:			
2. The name	and the Florida street address of	of the registered agent and office are:		_	
	Corporation Service Company				
		(Name)	APR	r zaum	
	1201 Hays Street		SSEE P	S CHARGE	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	Tallahassee	32301 FL	ATE AIDA	* Adamsed **	
		City/State/Zip	_		
liability comp registered ag statutes relati	pany at the place designated in the ent and agree to act in this capa ing to the proper and complete p		intment as provisions of a liar with and	all Devie	
	\$ 100.00 \$ 25.00 \$ 30.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional)			

Certificate of Status (optional)

5.00

SECRETARY OF STATE





CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, 2504 LAGUNA TERRACE, LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since April 8, 2015, and is in good standing in this state.

OF TOWN

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on April 15, 2015.

Boulous K. Cegarske

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20150415-0057
You may verify this electronic certificate
online at http://www.nvsos.gov/