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SECRETARY OF STATE

APR 17 2015 J. HARRIS



COVER LETTER

TO:

Registration Section Division of Corporations

Allied Capital and Development of South Florida, LLC

Name of Limited Liability Company

e of The enclosed rida.. Existence, and

Please return all correspondence concerning thi	s matter to the foll	owing:		
Pat Harris				
	Name	of Person	**	
Allied Capital ar	d Develop	ment of	South	n Florida, LLC
	Firm/0	Company		
115 Front Str	eet, Suite	e 300		
	Λ	ldress		
Jupiter, FL 33	3477			
	City/State	and Zip Code		
pat@usifund.	com			
	dress: (to be used for	future annual rep	ort notific	ation)
For further information concerning this matter,	please call:			
Pat Harris		, 561	, 983	3-4465
Name of Contact Pers	·	Area Code	<i>'</i>	ytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Division of Registratio Clifton But 2661 Exec		cle	
Enclosed is a check for the following a		7 6 (5 5 00 C) .	D 0.	□ 51(0,00 PF F C
	Filing Fee & I ate of Status	\$155.00 Filing Certified Cop		☐ \$160.00 Filing Fee, Cert of Status & Certified Co



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

March 20, 2015

PAT HARRIS 115 FRONT STREET, SUITE 300 JUPITER, FL 33477

SUBJECT: ALLIED CAPITAL AND DEVELOPMENT OF SOUTH FLORIDA, LLC

Ref. Number: W15000019963

We have received your document for ALLIED CAPITAL AND DEVELOPMENT OF SOUTH FLORIDA, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

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), AuthorizedPerson (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.

Jenna D Harris Regulatory Specialist II

Letter Number: 215A00005696

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: LIMITETY LIABILITY COMPANY TO TRANSACT RUSINESS. IN THE STATE OF FLORIDA:

1. Allied Capital and Development o	f South Florida, LLC		
(If name unavailable, enter alternate name adopted for the p Liability Company," "L.L.C." or "L.C.")	nurpose of transacting business in Flor	rida. The alternate name must i	nelude "Limited
₂ Delaware	_{3.} 20-163050)3	
(Jurisdiction under the law of which foreign limited habi company is organized)	lity (F	El number, il applicable)	
_{4.} January 20, 2015		•	
(Date first transacted	business in Florida, if prior to registra & 605,0905, F.S. to determine penalty		
5. 115 Front Street, Suite 300		Ž	22 22
Jupiter, FL 33477))	APR TI
6. 115 Front Street, Suite 300	reet Address of Principal Office)	SSE E	ARY CO. THE
Jupiter, FL 33477		. F_ 0;	F 57 5
	(Mailing Address)	Ê	<u> </u>
7. The name, title or capacity and address of	f the person(s) who has/have	e authority to manage is	s/are:
Nicholas A. Mastroianni, II	Manager 115 Front	St., #300, Jupi	ter, FL 3347
•		, , ,	

8. Attached is an original certificate of existe having custody of regords in the jurisdiction acceptable. If the certificate is in a foreign-ta-	under the law of which it is	organized. (A photocop	py is not
must be submitted	nguage, a translation of the c		THE WANSIAGO
Signs (In accordance with section 605-0203, F.S., the execution of this cam aware that any false information submitted in a document to the content of the c		the penalties of perjury that the fa	

Nicholas A. Mastroianni, II

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.

1. The name of th	e Limited Liability Com	pany is:		
Allied Capital a	nd Development of South F	lorida, LLC		
f unavailable, the	alternate to be used in the	ne state of Florida	is:	
2. The name and t	the Florida street address	of the registered a	agent and office are:	
· _	Donald M. Allison, Esqu	uire		h.
	: :- : : : : : : : : : : : : : : : : :	(Name)		<u> </u>
	33 Southeast Fifth Street	, Suite 100		2015 TALL
	Florida Street Ad	ddress (P.O. Box NOT	ACCEPTABLE)	APR
	Boca Raton	FI.	33432	TARY UF ASSEELF
	Citý/State/Zip			
iability company d registered agent an itàtutes relating to	d as registered agent and it the place designated in adagree to act in this cap the proper and complete ons of my position as reg	this certificate, I he pacity. I further ago performance of my istered agent as pre-	ereby accept the apport ree to comply with the p y duties, and I am famil	ntment as provisions of all liar with and
·	(Sign	nature)		
	\$ 100.00 \$ 25.00	—	Application Registered Agent	
	\$ 30.00	Certified Copy	(optional)	
	\$ 5.00	Certificate of S	Status (optional)	

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "ALLIED CAPITAL AND DEVELOPMENT OF

SOUTH FLORIDA, 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 SECOND DAY OF

APRIL, A.D. 2015.

5656350 8300

150457345

AUTHENTY CATION: 2261030

DATE: 04-02-15

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