Division of Corporations Electronic Filing Cover Sheet

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(((H15000102181 3)))



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From:

Account Name : C T CORPORATION SYSTEM

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Account Number : FCA000000023 : (850)205-8842

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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 WE PARK AT LAUREL OAKS LLC

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$160.00

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Corporate Filing Menu

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1 4/27/2015 10:54:24 AM From: To: 8506176383(2/5)

COVER LETTER

	Registration Section Division of Cosporations
SURJEC	T: WE Park at Laurel Oaks LEC
	Name of Limited Liability Company
The enclo Existence	sed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida." Certificate of and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please ret	im all correspondence concerning this matter to the following:
	Michael Kaplan
	Name of Person
	Harkavy Shainberg Kaplan & Dunstan PLC
	Firm/Company
	6060 Poplar Avenue, Suite 140
	Address
	Memphis TN 38119
	City/State and Zip Code
	jeffw@whiteeaglegroup.com
	E-mail address: (to be used for future armual report notification)
For further	information concerning this matter, please call;
-	Area Code Daytime Telephone Number
	Name of Connect reison Mea Code Daytine Telephonic Number
	ALLING ADDRESS: STREET ADDRESS:
	ivision of Corporations Division of Corporations egistration Section Registration Section
	O. Box 6327 Clifton Building
7	allahassee, Fl. 32314 2661 Executive Center Circle
	Taltuhassee, Fl. 32301
Enclosed	is a check for the following amount:
	\$125.00 Filing Fee
	Certificate of Status Certified Copy of Status & 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 FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

WE Park at Laurel Oal		31532	"Limited Liability Company," "L.L.C"	Torritt''
(rames of 1 over	to Chance Cabinia Combana: muzi ini	LIUQ	company, A.L.C.,	or ELC.)
(If name unavailable, enter al Liability Company," "L.L.C."		tran	secting business in Florida. The alternate	name must include "Limited
2. Delaware		3.	47-3548260	
(Jurisdiction under the law company is organized)	of which foreign limited liability	٠,	(FCJ number, if appl	icable)
4. NA				دے
	(Date liest transacted business (See sections 605,0904 & 605,090	n Fl 15. F	orda, if prior to registration.) S. to determine penalty liability)	
5. 12 College Road				
Monsey, NY 10952				27
	(Street Addre	Ss O	Principal Office)	700 5
6. 12 College Road	···			<u> </u>
Monsey, NY 10952				933
	(Mai	ling	Address)	
7 The name title or	canacity and address of the ne	rc O	n(s) who has/have authority to i	mungge iclore:
7. The hame, the of	capacity and address of the pe	1301	its) who has have numbers to	manage israte.
Jeffrey Weiskopf, Manage	r			· · · · · · · · · · · · · · · · · · ·
12 College Road				
Monsey, NY 10952				
having custody of reco acceptable. If the certi- must be submitted)	ords in the jurisdiction under the ficate is in a foreign language, Signature of 1203, F.S., the execution of this document co	a ti	ore than 90 days old, duly auther aw of which it is organized. (A ranslationy of the certificate und authorized person attention affirmation under the penalties of person	photocopy is not er oath of the translator
um aware that any false informati		וס ומד	State constitutes a third degree felony as prov	ided for in \$ \$17 (55, F.S.)
	Michael		, Kuplan	
	Typed or printe	ed r	name of signet	

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 Lin WE Park at Laurel Oaks LL	nited Liability Company is:			
If unavailable, the altern	nate to be used in the state of Florida is:			
2. The name and the FI	orida street address of the registered agent and office are:	7016 NPR 2		
C' T Cor	poration System	3 2 m		
	(Name)	一		
1200 Sa	outh Pine Island Road	PS &		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)			
Plantatio		~~		
	City/State/Zip			

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 dutles, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

James M. Halpin
Assistant Secretary

\$ 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 :

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "WE PARK AT LAUREL OAKS 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-FIRST DAY OF APRIL, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WE PARK AT LAUREL OAKS LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF MARCH, A.D. 2015.

5718080 8300

150538265

DATE: 04-21-15

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