# 11500007569

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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K.SALY EXAMINER SEP 23 2015 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT	NO.	:	I20000000195

REFERENCE: 791062 4304512

AUTHORIZATION : Soul Bless

COST LIMIT : \$ (1/2) 100

ORDER DATE: September 21, 2015

ORDER TIME : 2:50 PM

ORDER NO. : 791062-035

CUSTOMER NO: 4304512

#### FOREIGN FILINGS

NAME: HOME PARTNERS GA 2015 LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

#### **COVER LETTER**

TO:

Registration Section

BJECT:	Home Partners GA			<del></del>			
		Name of Limited Liability Company					
					ansact Business in Florida," Cer y company to transact business		
ase return	all correspondence	concerning this matter to the	following:				
	Sharon S. Parl	<b>K</b>					
		7	lame of Person				
	Home Partners	s of America, Inc.					
Firm/Company							
	180 North Ste	tson Avenue, Suite 3650					
			Address				
	Chicago, IL 60	0601					
		City/5	State and Zip Code				
	spark@homepa	rtners.com					
		E-mail address: (to be use	d for future annual	report no	tification)		
further in	nformation concerning	ng this matter, please call:					
Sha	aron S. Park		877 at (	234-51	55		
	Name	of Contact Person	Area Code	Day	time Telephone Number		
Div Reg	ILING ADDRESS ision of Corporation istration Section Box 6327			Division	F ADDRESS: of Corporations ion Section		
	ahassee, FL 32314			2661 Exe	ecutive Center Circle see, FL 32301		
	check for the follow						
□ \$	125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	□ \$160.00 Filing Fee, Certifit of Status & Certified Copy	cate	

### 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: Home Partners GA 2015 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.") Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) Upon qualification (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 180 North Stetson Avenue, Suite 3650, Chicago, IL 60601 (Street Address of Principal Office) 180 North Stetson Avenue, Suite 3650, Chicago, IL 60601 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.
Corporation Service Company Melissa Zender By: Asst. Vice President (Registered agent' 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: William Young, Managing Partner, Edward J. Dowd, Senior Vice President; John S. Dowd, Senior Vice President; Benjamin Hellweg, Senior Vice President; Sharon S. Park, Senior Vice President; Ayoub A. Rabah, Senior Vice President address for all of the above: 180 North Stetson Avenue, Suite 3650, Chicago, IL 60601 9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am 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.

Typed or printed name of signee

Sharon S. Park

## <u>Delaware</u>

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "HOME PARTNERS GA 2015 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 SEPTEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HOME PARTNERS GA 2015 LLC" WAS FORMED ON THE FOURTH DAY OF AUGUST, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

2015 SEP 22 AHII: 45 SECRETARY OF STATE

Authentication: 10099100

Date: 09-21-15

5797177 8300 SR# 20150198096