## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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#### Foreign Limited Liability Company **Urbanite Development LLC**

Certificate of Status	[ 0
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Electronic Filing Menu

Corporate Filing Menu

Help

#### **COVER LETTER**

TO:	Registration Section
	Division of Corporations

## Urbanite Development LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

	lme	da Vasquez	
• <u> </u>	Na	me of Person	<del></del>
	Legalz	oomi.com, Inc.	
	Pi	m/Company	
	100 W. Br	oadway Suite 10	00
		Address	
	Glenda	ale, CA 91210	
<del></del>	City/St	ate and Zip Code	
tdmcelro@vt	.edu		
<u></u>	B-muil address: (to be used	for future annual repor	t notification)
or further information concerning	g this matter, please call:		•
imelda Vasquez		323	962-8600
Name o	f Contact Porson	Area Code	Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Division Registra Clifton 2661 Ex	T ADDRESS: 1 of Comporations 1	3
Enclosed is a check for the f	ollowing amount:  \$\sum \$130.00 \text{ Filing Fee & Certificate of Status}\$	■ \$155.00 Filing I Certified Copy	Fee & S160.00 Filing Fee, Certificat 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

((If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC.")  Virginia  2. Virginia  3. (FEI number, If applicable)  (Duridiction under the law of which foreign limited liability  (PEI number, If applicable)  (Duridiction under the law of which foreign limited liability  (See sections 605.0040 & 603.0005, F.S. to determine pennity inability)  5. 15901 Northlake Village Dr.  Odessa, Florida 33556  (Street Address of Principal Office)  6. 15901 Northlake Village Dr.,  Odessa, Florida 33556  (Mailing Address)  7. The name, title or capacity and address of the person(s) who has/have authority to manage is April 17 (See Sections 605.0000, Mailing Address)  7. Tyrell McElroy, Member, 15901 Northlake Village Dr., Odessa, Florida 33556  Kathleen Pokrana-McElroy, Member, 15901 Northlake Village Dr., Odessa, Florida 33556  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)  Signature of an authorized person  (In accordance with set time 605.0203, F.S., the execution of the Department of State considers a third degree folony as provided for in s.817.155, F.S.)  Tyrell McElroy	FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:			
2 Virginia 3. (PEI number, if applicable) 2 Virginia 3. (PEI number, if applicable) 3. (PEI number, if applicable) 4. 11/1/2015  (Dute first immuscled business in Florida, if prior to registration.) (See sections 603.0904 & 603.0905, F.S. to determine pennity line litty) 5. 15901 Northlake Village Dr.  Odessa, Florida 33556  (Street Address of Principal Office) 6. 15901 Northlake Village Dr.,  Odessa, Florida 33556  (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/Age. 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/Age. 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/Age. 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/Age. 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/Age. 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/Age. 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/Age. 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/Age. 7. The name, title or capacity and address of the person of the certificate is in a foreign language, a franslation of the certificate 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 franslation of the certificate under oath of the translator must be submitted)  Signature of an authorized person (th accordance with section 605.0203, F.S., the execution of this document conditions authorized person are approved for in s.817.155, F.S.)  Tyrell McElroy	1. Urbanite Development LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "Ll.C.")		~	
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	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.

<ol> <li>The name of the Limited Liability Comp</li> </ol>	•
Urbanite Development LL	LC .
If unavailable, the alternate to be used in the	e state of Florida is:
2. The name and the Florida street address	of the registered agent and office are:
United States C	Corporation Agents, Inc.
	(Name)
	Oak Court, Suite A
Florida Street Ad	dress (P.O. Box NOT ACCEPTABLE)
Tampa	FL 33612
	City/State/Zip
liability company at the place designated in t registered agent and agree to act in this cape statutes relating to the proper and complete p	to accept service of process for the above stated limited this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and stated agent as provided for in Chapter 605, Florida
(Sign	Cheyenne Moseley, Assistant Secretary on behalf United States Corporation Agents, Inc.
\$ 100.00	£7
\$ 25.00 \$ 30.00	
\$ 5.00	** **

# Commonbrealth of Hirginia



# State Corporation Commission

### CERTIFICATE OF FACT

## I Certify the Following from the Records of the Commission:

That Urbanite Development LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is April 17, 2013; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: November 5, 2015

Joel H. Peck, Clerk of the Commission

CISECOM

Document Control Number: 1511055529