M1500009906

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



900279182929

11/17/15--01002--009 **155.00

FILED TESTANDY 16 PH 4:3

HOV 17 2015 J. BRUCE

Wolters Kluwer	2075 Centre Pointe Boulevard, Tallahassee, FL, 32308				
FCB REO III, LLC					
Too Kee III, Lee					
, ,r					
<u> </u>					
Thank you!					
mank you:					
		-			
() Profit	() Amendment	() Merger			
() Nonprofit					
() Foreign	() Dissolution/Withdrawal () Reinstatement	() Mark	ALL AHA		
() Limited Partnership	() Annual Report	() Other	<u> </u>		
(X)LLC	() Name Registration		38.3 18.3 18.3 18.3 18.3 18.3 18.3 18.3		
Registration	() Fictitious Name	() UCC	Mrc.		
(X) Certified Copy	() Photocopies	()CUS			
New Registration	<u> </u>		RX S		
() Call When Ready	() Call If Problem		<u> </u>		
(x) Walk In	() Will Wait	(x) Pick Up)		
() Mail Out					
Name	11/16/2015	Order#:			
Availability		9773194	}		
Document	ST				
Examiner		Ref#:			
Updater					
Verifier					
W.P. Verifier		Amount: \$			

2075 Centre Pointe Boulevard, Tallahassee, FL, 32308 850-205-8842

COVER LETTER

SUBJECT:	CB REO III, LLC	;		_			
		Náme of	Limited Liability	Company		•	
The enclosed "A Existence, and o	Application by Fo check are submitt	reign Limited Liability Comed to register the above refer	pany for Authoriz enced foreign lim	ation to Tr ited liabilit	ansact Business in Florida," y company to transact busin	Certificate of the control of the certificate of th	of la
Please return al	l correspondence	concerning this matter to the	following:				
	Grace Arrasca	ota, VP-Legal					
		N	lante of Person	· · · · · · ·		•	
	Florida Comm	unity Bank N.A.					
	 	F	lrin/Company	- ,			
	2500 Weston:I	Road, Suite 300					
			Address				
	Weston, FL 33	3331					
	·	City/S	tate and Zip Code				
	garrascaeta@fcb	1923.com				65	
		E-mail address: (to be use	d for future annua	report no	ification)	205	Marini intern
For further infor	rmation concernin	g this matter, please call:				NE S	
Grace	Arrascaeta, VP-L	¢gal	305	668 54	SS: SS:	₩ -	
***************************************	Name (of Contact Person	Area Code	Day	time Telephone Number	C 2	
Divisio Registr P.O. Bo	ING ADDRESS; on of Corporations atlan Section ox 6327 assec, FL 32314			Division Registrat Clifton B 2661 Exe	ADDRESS: Sof Corporations ion Section	12: 4 4	
	eck for the follow 5.00 Filing Fee	ring amount: \$\Bigsize \\$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy	g Fee∙&	☐ \$160.00 Filing Fee, Ce of Status & Certified Cop		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0902; FLORIDA STATUTES, THE FOLLOWING AS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

COMPANT TO TIVINGACT DO	NAMES ANT THE OTAT TOO TOO NOTE:	
, FCB REO III, LLC		
(Name of Fore	eign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C.")	
FCB REO HOLDINGS II		
Liability Company," "L.L.C,"	lternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited" or "LLC.")	
2. Delaware	3. TBP	
(Jurisdiction under the law company is organized)	of which foreign limited liability (FEI number, if applicable)	
4	(Date first transacted business in Florida, if prior to registration.)	
	(See sections 605,0904 & 605,0905, F.S. to determine penalty liability).	
5. 2500 Weston Road, Su	nite 300	
Weston, FL 33331	<u> </u>	
	(Street Address of Principal Office)	
6. Same as #5	A: 2	
	2015 I	****
,	(Mailing Address)	smar.
7. Name and street addres	is of Florida registered agent: (P.O. Box. NOT acceptable)	
Name:	NRAI Services, Inc.	e and
Office Address:	1200 S. Pino Island Rd, Suito 250	Ĺ
3,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Plantation, Florida , Florida 33324	
	(City) (Zip code)	
Registered agent's accept	tance: gistered agent and to accept service of process for the above stated limited liability company at the place	,
designated in this applicat	tion. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agr	CC
to complywith the provision	ons of all stoyutes relative to the proper and complete performance of my duties, and I am familiar with my position as registered agent. Angel Nunez	and
accept the bungations of t	Assistant Secretary	
	(Registered agent's signature)	
	acity and address of the person(s) who has/have authority to manage is/arc:	
Larry Benton - Manager	2500 Weston Road, Suite 300, weston, FL 33331	
Sam Carter - Manager	2500 Weston Road, Suite 300, Weston, FL 32331	
Jim Baiter - Manager	2500 Weston Road, suite 300, Weston, Fl. 33331	
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	of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath	i
of the translator must be su	ubmitted) NANA 1/6	
	X XIVV COLOR	
	Signature of an authorized person	
This document is executed submitted in a document to	in accordance with section 605.0203.(1) (b), Florida Statutes. I am aware that any false information the Department of State constitutes a third degree felony as provided for in s.817:155, F.S.	
	Larry Benton - Manager	
	Typed or printed name of signer	

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "FCB REO III, 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 SIXTEENTH DAY OF NOVEMBER, A.D. 2015.

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

Authentication: 10424038

Date: 11-16-15

5849134 8300 SR# 20150923697