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#### TULA MICHELE HAFF

Attorney and Counselor at Law

TELEPHONE 863.421.2626

135 NORTH 6<sup>TH</sup> STREET, SECOND FLOOR HAINES CITY, FLORIDA 33844-4247

FACSIMILE 863.421.2828

December 3, 2015

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314 VIA NEXT DAY AIR

RE: Application by Foreign Limited Liability Company for

Authorization to Transact Business in Florida

Polk County Land Partners, LLC

Our File No.: 14185

#### Dear Representative:

Attached you will find an Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida for Polk County Land Partners, LLC, to be filed with your office. Also please provide a Certificate of Status to my office upon completion. Enclosed you will find my firm's check in the amount of \$105.00 to cover the filing fee for this document and for the Certificate of Status.

Please file the Application by Foreign Limited Company for Authorization to Transact Business in Florida and return one stamped copy to my office along with the Certificate of Status. I have enclosed a postage pre-paid, self-addressed envelope for your convenience.

If you have any questions, please feel free to contact my office.

INVIA FIV

Tula Michele Haff

TMH/dlh Enclosures

### 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 COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

	ternate name adopted for the purpose of transac	ting business in Florida. The alternate na	me must include "Limited
Liability Company," "L.L.C,"	' or "LLC.")		
2. Delaware (Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable	e)
4	(Date first transacted business in Florid	a if notes to registration \	
	(See sections 605.0904 & 605.0905, F.S.	to determine penalty liability)	
5. 8297 Champions Gate	Blvd. #401		
Champions Gate, FL 3	3896		語 <b>8</b> 市
	(Street Address of Principal O	fice)	TSSE 5 E E
6. 8297 Champions Gate	Blvd. #401		
Champions Gate, FL 3			- 35 = U
	(Mailing Address)		
7. Name and street addres	$\underline{s}$ of Florida registered agent: (P.O. Box $\underline{N}$	OT acceptable)	<b>(</b> 5-
Name:	Jean Marsen		
Office Address:	8297 Champions Gate Blvd #401	·	
	Champions Gate	Florida 33896	
Registered agent's accep	(City)	(Zip code)	<del></del>
designated in this applica to complywith the provision	gistered agent and to accept service of protion, I hereby accept the appointment as roons of all statutes relative to the proper an my position as registered agent.	egistered agent and agree to act in to d complete performance of my dution	his capacity. I further agree
	Registered agent'	s signature)	
8. The name, title or capa	acity and address of the person(s) who has/b	nave authority to manage is/are:	
Jean Marsen, Manager			
			<del></del>
9. Attached is a certificate jurisdiction under the law of the translator must be s		s in a foreign language, a translation	g custody of records in the of the certificate under oath
	Algnature of an author	prized person	
This document is executed submitted in a document to	I in accordance with section 605.0203 (1) (to the Department of State constitutes a third	o), Florida Statutes. I am aware that a degree felony as provided for in s.81	ny false information 7.155, F.S.
	Jean Marsen		

Typed or printed name of signee

## Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "POLK COUNTY LAND PARTNERS, 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-THIRD DAY OF NOVEMBER, A.D. 2015.

15 DEC 15 PM 1: 00

A STATE OF THE STA

Authentication: 10478423

Date: 11-23-15