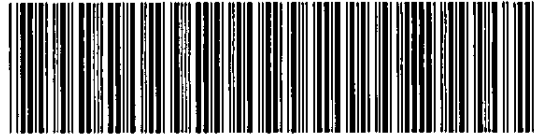


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\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(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

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
15 DEC 16 PM 2:26  
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SUFFICIENCY OF FILING

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2015 DEC 16 AM 9:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Culligan DEC 17 2015

Date: 12/16/2015

Account #: I20000000088

Name: Michelle Walker

Reference #: G022495

ENTITY NAME: ALPHA GAMMA DELTA PROPERTY MANAGEMENT, LLC

- Articles of Incorporation/Authorization to Transact Business
- Amendment
- Annual Report
- Change of Agent
- Reinstatement
- Conversion
- Merger
- Dissolution/Withdrawal
- Fictitious Name
- Other: \_\_\_\_\_

Authorized Amount: \$125

Signature: M. Walker

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: ALPHA GAMMA DELTA PROPERTY MANAGEMENT, 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:

**KRISTI LEHMAN**

Name of Person

**FAEGRE BAKER DANIELS**

Firm/Company

**300 N. MERIDIAN STREET, STE 2700**

Address

**INDIANAPOLIS, IN 46204**

City/State and Zip Code

**EXEMPTINDY@FAEGREBD.COM**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**KRISTI LEHMAN**

Name of Contact Person

at ( **317** )

Area Code

**569-4884**

Daytime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

\$125.00 Filing Fee

\$130.00 Filing Fee &  
Certificate of Status

\$155.00 Filing Fee &  
Certified Copy

\$160.00 Filing Fee, Certificate  
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:

1. ALPHA GAMMA DELTA PROPERTY MANAGEMENT, 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.")

2. OKLAHOMA (Jurisdiction under the law of which foreign limited liability company is organized)
3. (FEI number, if applicable)

4. upon qualification
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 8710 N. MERIDIAN STREET, INDIANAPOLIS, IN 46260
(Street Address of Principal Office)

6. 8710 N. MERIDIAN STREET, INDIANAPOLIS, IN 46260
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: National Corporate Research, Ltd., Inc.

Office Address: 115 North Calhoun Street, Suite 4

Tallahassee, Florida 32301
(City) (Zip code)

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.

Anthony G. Truby, VP of NCR
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

See Attachment - Board and Officers

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)

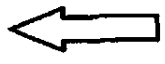
Signature of an authorized person

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.

WENDY BRIGHT FAUST, EXECUTIVE DIRECTOR

Typed or printed name of signee

FILED
2015 DEC 16 AM 9:59
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA



**Attachment  
Officer and Directors**

<b>Name</b>	<b>Title</b>
<b>Wendy Bright Faust</b>	<b>Executive Director</b>
<b>Katie Jolley Abernathy</b>	<b>President</b>
<b>Gail Calkins Duree</b>	<b>Director</b>
<b>Mary Beth Dulcey Morabito</b>	<b>Director</b>
<b>Bobette Sandlfer Thompson</b>	<b>Director</b>

**8710 N. MERIDIAN STREET, INDIANAPOLIS, IN 46260**

**317.663.4200**

**[fncfinance@alphagammadelta.org](mailto:fncfinance@alphagammadelta.org)**

**FILED**  
**2015 DEC 16 AM 10:00**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

OFFICE OF THE SECRETARY OF STATE



**CERTIFICATE OF GOOD STANDING  
DOMESTIC LIMITED LIABILITY COMPANY**

*I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.*

*I FURTHER CERTIFY that ALPHA GAMMA DELTA PROPERTY MANAGEMENT, LLC whose registered agent is ARTHUR F. HOGE III, with its registered office at 1900 N.W. EXPRESSWAY SUITE 1400 OKLAHOMA CITY 73118 USA Oklahoma is a Domestic Limited Liability Company duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.*



*IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this 3rd, day of December, 2015.*

A handwritten signature in black ink, appearing to read 'Chris Benge', is written over a horizontal line.

Secretary Of State