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Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations'

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Foreign Limited Liability Company Manor at Harbour Island, LLC

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1/25/2016 10:18:46 AM From: To: 8506176383(2/4)

COVER LETTER

TO:	Registration Section Division of Corporati	ons				
SUBJE	Manor at Harbour	Island, LLC				
		Name	of Limited Liability	Company		
					ansact Business in Florida," Certific ty company to transact business in F	
Please r	eturn all correspondence	concerning this matter to t	he following:			
	Kelly Arrigo					
	<u> </u>		Name of Person	,		
	Prudential Re	al Estate Investors				
	Firm/Company					
	7 Giralda Farms					
Address						
	Madison, NJ	07940				
	' 	City	/State and Zip Code			
	kelly.arrigo@p	rudential.com				
		E-mail address: (to be u	sed for future annual	report no	tification)	
For furt	her information concerni	ing this matter, please call:				
	Kelly Arrigo		973 at (683-16	538	
	Name	of Contact Person	Area Code	Day	ytime Telephone Number	
	MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton E 2661 Exc	FADDRESS: of Corporations tion Section Building coutive Center Circle see, FL 32301	
Enclos e	d is a check for the follows: \$125.00 Filing Fee	wing amount: \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filir Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	

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

IN COMPIJANCE 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:

(Name of For	ign Limited Liability Company; mus	it include "Limited L	iability Company," "L.L.C.," o	or "LLC.")	
f name unavailable, enter a	ternate name adopted for the purpose	e of transacting busin	ess in Florida. The alternate na	ame must includ	• "Limited
ability Company," "L.L.C,	or "LLC.")	_			
Delaware		38	1-1191446	·	
(Jurisdiction under the law company is organized)	of which foreign limited liability		(FEI number, if applicable	.c)	
Upon registration				_	
	(Date first transacted busines (See sections 605.0904 & 605.0	ss in Florida, if prior 0905, F.S. to determi	to registration.) ine penalty liability)		
7 Giratda Farms, Mad	son, New Jersey 07940				
	<u></u>	<u> </u>		_	
				— <u> </u>	
of Decidential Book East	(Street Address of P	'rincipal Uffice)		ASE.	<u></u>
c/o Prudential Real Est	HE INVESTORS			- 58	<u>د</u>
7 Giralda Farms, Mad	ison, New Jersey 07940, Attention	n: WCOT Asset Ma	anager	>= = 1 == 1 == 1 == 1	
	(Mailing A	(ddress)	,	- SS	CO pro
Name and street address	s of Florida registered agent: {P.0	O. Box NOT accer	ptable)	<u>,∓1</u> <	ð
	C T Corporation System		•		
Name:					
Office Address:	1200 South Pine Island Road			<u> </u>	3 D
	Plantation		Florida	>m >	
	(City)		(Zip code)	_	
gistered agent's accep			de a el acca adad Hardond Ha	Liller commencer	
iving ocen namea as re signated in this applica	gistered agent and to accept servi tion, I hereby accept the appoints	uce of process for i ment as registered	agent and agree to act in t	his capacity. I	further o
complywith the provision	ons of all statutes relative to the p	proper and comple	te performance of my dutic	es, and I am fa	ımiliar wi
cept the obligations of i	ny position as registered agent. C Tecorporation Sy	/stem	<i>c</i>		
	By: C T Corporation Sy		<u>Connie Bruon</u>		
	(Registe	cred @cnt's signature	erictoot Cocroto	AFT I	
The name, title or capa	wity and address of the person(s)	who has/have author	ority to manage is are:	ıΙΥ	
	Island, LLC, the sole member of			•	
Giralda Farms, Madisor	New Jersey (1704)	<u></u>	· · · · · · · · · · · · · · · · · · ·		
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Attached is a certificate isdiction under the law the translator must be so	ubmitted)	of an authorized pers	on		
isdiction under the law the translator must be s	obmitted)	•		ny false inform	ation
isdiction under the law the translator must be so is document is executed	ubmitted)	203 (1) (b), Florida	a Statutes. I am aware that a	 ny false inform 7.155, F.S.	ation
isdiction under the law the translator must be so is document is executed	in accordance with section 605.02	203 (1) (b), Florida	a Statutes. I am aware that a	ny false inform 7.155, F.S.	ation

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MANOR AT HARBOUR ISLAND, 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 TWELFTH DAY OF JANUARY, A.D. 2016.

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

5931670 8300

SR# 20160178901 You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 201659474

Date: 01-12-16