Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)205-8842

Fax Number

: (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company NW/PSREG Princeton Venture, LLC

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Corporate Filing Menu

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FEB 1 1 2016

2/10/2016

2/10/2016 1:21:50 PM From: To: 8506176383(2/4)

COVER LETTER

| | Registration Section Division of Corporation | ons | | | | | | | |
|------------------------------|---|---|--|---|---|-----------------------|--|--|--|
| SUBJEC | NW/PSREG Princ | eton Venture, LLC | | | | | | | |
| 300000 | | Name of Limited Liability Company | | | | | | | |
| The enclo Existence | sed "Application by Fo , and check are submitt | oreign Limited Liability Comed to register the above refer | pany for Authoriz enced foreign lim | ation to Tr ited liabilit | ansact Business in Florida," Certi y company to transact business in | lficate of Florida | | | |
| Please ret | um all correspondence | concerning this matter to the | following: | | | | | | |
| | Cliff Holt | | | | | | | | |
| | | N | ame of Person | | • | | | | |
| | Sutherland, | Asbill & Brennan LLP | | | | | | | |
| | | Fi | inn/Company | | | | | | |
| 999 Peachtree St NE Ste 2300 | | | | | | | | | |
| | | | Address | | | | | | |
| | Atlanta, GA | 30309-3996 | | | | | | | |
| | | City/\$ | tate and Zip Code | | · | | | | |
| | Cliff.holt@su | therland.com E-mail address: (to be used | for future annual | report not | tification) | | | | |
| For further | information concerning | g this matter, please call: | | | | | | | |
| , | Cliff Holt | | at (404 |) 853- | | • | | | |
| | Name o | of Contact Person | Area Code | Day | time Telephone Number | | | | |
| D Re P. | IAILING ADDRESS: ivision of Corporations egistration Section O. Box 6327 allahassee, FL 32314 | | | Division Registrate Clifton B 2661 Exe | CADDRESS: of Corporations ion Section uilding coutive Center Circle ice, FL 32301 | | | | |
| | s a check for the follow \$125.00 Fiting Fee | ing amount: ☐ \$130.00 Filing Fee & Certificate of Status | ☐ \$155.00 Filin Certified Copy | ig Fee & | CI \$160.00 Filing Fee, Certifier of Status & Certified Copy | ate | | | |

2/10/2016 1:21:50 PM From: To: 8506176383(3/4)

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 RUSINESS, IN THE STATE OF IT ORIDA:

| 1. NW/PSREG Princeton | • | | | | | |
|---|--|---|--|------------------------------------|-----------------------------------|--|
| (Name of For | eign Cimited Liability Company; mu | st include "Limited Liabilit | y Company," "L.L.C. | ," or "LLC.") | | |
| (If name unavailable, enter a | fternate name adopted for the purpos | e of transacting business in | Florida, The alternate | name must inclu | ids "Limited | |
| 2. Delaware | | 3. 81-1380547 | | | | |
| (Jurisdiction under the law company is organized) | the law of which foreign limited flability (FBI number, if applicable) ized) | | | | | |
| 4. | | | | | | |
| | (Date tirst transacted busine (See sections 605.0904 & 605. | ss in Florida, il prior to reg .0905, F.S. to determine pe | istration.) nalty liability) | | | |
| 5. c/o Pollack Shores Rea | al Estate Group, LLC, One Premi | | | | | |
| Atlanta, GA 30342 | | | | | | |
| | (Street Address of I | | | | . American and Mark | |
| 6. c/o Pollack Shores Rea | 1 Estate Group, LLC, One Premie | er Plaza, 5605 Glenridge | Drive, Ste. 775 | | | |
| Atlanta, GA 30342 | | | | AZA ASS | By standard day page tarty | |
| *************************************** | (Mailing / | Address) | | | | |
| 7. Name and street address | s of Florida registered agent: (P. | O. Box NOT acceptable | :) | ાં _ન > | ₽ * \$ ₽ | |
| Namo: | C T Corporation System | | | STA: | O | |
| Office Address: | 1200 South Pine Island Road | | | | | |
| | Plantation | F | Plorida 33324% | | | |
| | (City) | | (Zip code |) | | |
| designated in this applicate to comply with the provision accept the obligations of a | gistered agent and to accept servition, I hereby accept the appoint ons of all statutes relative to the property of the position as registered agent. By: | ment as registered agen proper and complete per ysiem Michael . | t und agree to act is rjormance of my de | n this capacity. | I further agre | |
| | | ared agent's signature) | Coording | | | |
| 8. The name, title or capa Steven L. Shores, Authori | city and address of the person(s) zed Signatory | who has/have authority t | to manage is/are: | | | |
| c/o Pollack Shores Real E | state Group, LLC, Onc Premier P | 'inza | | | | |
| 5605 Glenridge Drive, Sui | ite 775, Atlanta, GA 30342 | | | | | |
| Attached is a certificate urisdiction under the law of the translator must be su | of existence, no more than 90 day of which it is organized. (If the ce | ertificate is in a foreign la | d by the official havingungs, a translatio | ing custody of a | records in the cate under oath | |
| This document is executed submitted in a document to | in accordance with section 605.0 the Department of State constitut | 203 (1) (b), Florida Statutes a third degree felony | utes. I am aware that as provided for in s. | t any false infor 817.155, F.S. | mation | |
| | Steven L. Shores | | | ~~~ | | |
| | 7\vned or or | rinted nume of signec | | | | |

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Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "NW/PSREG PRINCETON VENTURE, 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 NINTH DAY OF FEBRUARY, A.D. 2016.

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

540

Authentication: 201806223

Date: 02-09-16

5942195 8300 SR# 20160701640

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