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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : INCORP SERVICES INC  
Account Number : I201200000007  
Phone : (702)866-2500  
Fax Number : (702)866-2689

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

Email Address: documents@incorp.com

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Foreign Limited Liability Company  
STUDENT HOUSING TECHNOLOGIES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: STUDENT HOUSING TECHNOLOGIES, 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:

Nadine Long

Name of Person

InCorp Services, Inc.

Firm/Company

3773 Howard Hughes Pkwy South Tower, Suite 500

Address

Las Vegas, NV 89189-6014

City/State and Zip Code

documents@incorp.com

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

For further information concerning this matter, please call:

Nadine Long on behalf of InCorp Services, Inc. at (702) 866-2600  
Name of Contact Person Area Code 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. STUDENT HOUSING TECHNOLOGIES, LLC**

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC.")

**2. Nevada**

(Jurisdiction under the law of which foreign limited liability company is organized)

**3. 47-1228843**

(FBI number, if applicable)

**4. Upon Registration**

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

**5. 455 Epps Bridge Pkwy, Ste 201**

**Athens GA 30608**  
(Street Address of Principal Office)

**6. 455 Epps Bridge Pkwy, Ste 201**

**Athens GA 30608**  
(Mailing Address)

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

Name: **InCorp Services, Inc.**

Office Address: **17888 87th Court North**

**Loxahatchee**, Florida **33470**  
(City) (Zip code)

**Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated limited liability company 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.*

**Nadine Long** on behalf of InCorp Services, Inc.

(Registered agent's signature)

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

**Landmark Collegiate Development, LLC Member**  
**455 Epps Bridge Pkwy, Ste 201 Athens GA 30608**

**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 authorized person

This document is executed in accordance with section 605.0207 (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.

**J. Wesley Rogerson** behalf of Landmark Collegiate Development, LLC

Typed or printed name of signer

CLERK OF STATE  
TALLAHASSEE, FLORIDA

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## SECRETARY OF STATE

CERTIFICATE OF EXISTENCE  
WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **STUDENT HOUSING TECHNOLOGIES, LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since June 20, 2014, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 16, 2016.

A handwritten signature in cursive script that reads "Barbara K. Cegavske".

BARBARA K. CEGAVSKE  
Secretary of State



Electronic Certificate  
Certificate Number: C20160216-1104  
You may verify this electronic certificate  
online at <http://www.nvsos.gov/>