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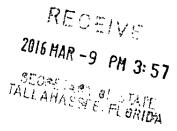
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SECRETARY OF STATE

MAR 1.5 2018 J. BRUCE



FLORIDA DEPARTMENT OF STATE Division of Corporations



March 1, 2016

RICHARD M. DUKE 102 RIVIERA DUNES WAY PALMETTO, FL 34221

SUBJECT: C39-C40 RIVIERA DUNES MARINA LLC

Ref. Number: W16000015066

We have received your document for C39-C40 RIVIERA DUNES MARINA LLC and your check(s) totaling \$130.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 66-days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 516A00004230

COVER LETTER

TO: Registration Section

Division of Corporations	
SUBJECT: C39-C40 RIVIERA DUNES MARINA LLC Name of Limited Liability Company	
Name of Emmed Enablity Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," C Existence, and check are submitted to register the above referenced foreign limited liability company to transact business.	tertificate of ss in Florida
Please return all correspondence concerning this matter to the following:	
RICHARD M. OUKE	
Name of Person	
Firm/Company	
102 RIVIERA DUNES WAY	
Address	
Address PALMETTO FL 34221 City/State and Zip Code	
PACMETTO 12 3922	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
O Tot further information concerning and matter, prease our.	
Name of Contact Person Name of Contact Person	
Name of Contact Person Area Code Daytime Telephoner Number	
MAILING ADDRESS: Division of Corporations STREET ADDRESS: Division of Corporations	1. 1.
Registration Section Registration Section	Legerand
P.O. Box 6327 Clifton Building	
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301	•
Tananassee, PL 32301 3	
Enclosed is a check for the following amount:	4:6 a a t a
□ \$125.00 Filing Fee	

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. C39-C40 KINIERA DUNES MARINA 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. Start of TEAS (Jurisdiction under the law of which foreign limited liability company is organized) 3. 81 1069021 (FEI number, if applicable)
4. MARCH 1, 2016 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. NIERA DYNES WAY
PACMETTO, FL 34221 (Street Address of Principal Office)
6. 102 RIVIERA DUNES WAY
Mailing Address) Mailing Address)
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: KICHARO M. DUKE
Office Address: 102 RIVIERA DIWES WAY
PACMETTO, FL 34221, Florida 34221 (City) (City)
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 complywith the provisions of all statutes relative to the proper and complete performance of my duties, and Lam familiar with and accept the obligations of my position as registered agent.
fiction White En T
(Registered agent's signature)
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
KICHARD M. DUKE PARTHER / MANAGING MEMBER
JAMES C. SMITH PATNER / MANAGING SMEMER
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.

Typed or printed name of signce

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Carlos H. Cascos Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for C39-C40 RIVIERA DUNES MARINA, LLC (file number 802364946), a Domestic Limited Liability Company (LLC), was filed in this office on January 08, 2016.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on March 11, 2016.



Carlos H. Cascos Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB Come visit us on the internet at http://www.sos.state.tx.us/ Fax: (512) 463-5709 TID: 10264

Dial: 7-1-1 for Relay Services Document: 660571080003