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Foreign Limited Liability Company Lakeside Center II (Edens), LLC

Certificate of Status	0
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Page Count	03
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Electronic Filing Menu Corporate Filing Menu

Help

COVER LETTER

SUBJECT:	Lakeside Center II (Edens), LLC				
	Name of Limited Liability Company				
The enclosed Existence, an	"Application by Foreign Limited Liab deheck are submitted to register the a	pility Company for Authoric bave referenced foreign lin	zation to Transact Business in Florida," Certificat aited liability company to transact business in Flor		
lease return	all correspondence concerning this me	atter to the following:			
	Mark P. Garside	•			
		Name of Person			
	i E dens				
		Firm/Company			
	1221 Main Street, Suite 1000				
		Address			
	Columbia, SC 29201	1			
	**************************************	City/State and Zip Code			
	MGarside@edens.com				
	E-mail address:	(to be used for future annua	l report notification)		
or further int	ormation concerning this matter, please	se call:			
Mari	P. Garsido	803	744-6733		
	Name of Contact Person	Area Code	Daytime Telephone Number		
Divis Regis P.O.:	LING ADDRESS: ion of Corporations tration Section 30x 6327 nassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
	heck for the following amount: 25.00 Filing Fee				

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

	CITON 605,0902, FLORIDA STATUTES, THE FO BUSINESS ON THE STATE OF FLORIDA:	DIALOWING IS SUBMITTED TO REGISTER A F	YOREIGN UM	TTED LLA	BILITA
Lakeside Center II (Ed	dens), LLC				
(Name of Po	reign faintfed Liability Company, must include	"Limited Liability Company," "L.L.C.," or "	LLC.")		
(If name unavailable, enter a	alternate name adopted for the purpose of trans	suring business in Piorida. The alternate name	must include	"Limited	:
2. South Carolina	, or ape.,)				
	of which foreign United Hability	(FEI number; if applicable)	· · · · · · · · · · · · · · · · · · ·		
∠ Upon Filing					
** ***********************************	(Date first transacted business in Flor (See sections 603,0904 & 605,0905, F.)	ndu, l' prior to registration.)			
5. 1221 Main Street, Sui	7g	بنسب واحی			
Cofumbia, SC 29201				Car	
	(Street Address of Principal	Office)	The state of the s	ZZ N	g to the
6			175 Avr.	~	‡
			Ψ1, 1 ¹ . 17, 21;	7	;
	(Malling Address)		TO 10		erd.T
7. Name and street address	ss of Florida registered agent: (P,O, Box	MOT acceptable)	25	4 :8	
Nume;	CT Corporation System		35		
Office Address:	1200 South Pine Island Road		>		
	Plantation	stlevida 33324			
	(City)	, Florida 33324 (Zip code)	•		
this application, I heraby with the provisions of all site obligations of my post	gistered agent and to accept service of proceed the appointment as registered agentatures relative to the proper and completion as registered agention as registered agent. (Registand agent ag	ant and agree to act in this capacity. I full to performance of the duties, and I am to the support of the Kimberl (a slaving) Assistant	other agree to familiar with Bagg	o compi and acc ett	ly cept
•	o, a Delaware limited partnership, Managi	• •			
Jodie W. McLean, Chief F					
	nuncial Officer and Willem C. Caldwall,	Monaging Director			
	The state of the s	The state of the s			
 Attached is a portificate jurisdiction under the law coffice translator must be such. 	of existence, no more than 90 days old, do of which it is organized. (If the confinence ibmitted) Significant of an auth	is in a foreign language, a translation of t	stody of reco he certificate	rds in th under o	ie ntli
This document is executed	in necordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any fi	hise informal	ion	
	the Department of State constitutes a third Mark P. Garaide, Chief Financial Officer	•	J.I, F.D.		
,	Typed or printed ann				

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina, Hereby Certify that:

LAKESIDE CENTER II (EDENS), LLC, a limited liability company duly organized under the laws of the State of South Carolina on June 17th, 2016, with a duration that is until December 31st, 2089, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. 33-44-809, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 24th day of June, 2016.

Mark Hammond, Secretary of State