Electronic Filing Cover Sheet

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(((H16000205158 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (850) 205-8842 Fax Number

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 AHA Southeast, LLC

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AUG 1 9 2016

S. YOUNG

Electronic Filing Menu

Corporate Filing Menu

Help

Registration Section P.O. Box 6327

Tallahassee, FL 32314

Certificate of Status

	COVER LETTER		
	stration Section sion of Corporations		
SUBJECT:	AHA Southeast, LLC		
	_		
The enclosed Existence, and	"Application by Foreign Limited Liability Company for Authorization to Transact Business in Flor it check are submitted to register the above referenced foreign limited liability company to transact by	da," Certificate of ousiness in Florida	
Please return a	all correspondence concerning this matter to the following:	==	
	Hilda Jusuf	3	
•	Name of Person	6 AUG 18	
	Affordable Housing Access, Inc.		
	Firm/Company		
	3920 Birch Street, Ste 103	AH 10: 04	
	Address		
	Newport Beach, CA 92660		
•	City/State and Zip Code		
	hjusuf@ahaccess.org		
	E-mail address: (to be used for future annual report notification)	_	
For further info	ormation concerning this matter, please call;		
Hilda	a Jusuf 949 253-3120		
	Name of Contact Person Area Code Daytime Telephone Numb	er .	
Divisi	LINC ADDRESS: ion of Corporations tration Section STREET ADDRESS: Division of Corporations Registration Section		

Clifton Building

■ \$155.00 Filing Fcc &

Certified Copy

2661 Executive Center Circle Tallahassee, FL 32301

□ \$160 00 Filing Fee, Certificate

of Status & Certified Copy

8/18/2016 3:11:57 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 BUSINESS IN THE STATE OF FLORIDA:

AHA Southeast, LLC		1. 11 1. 11 1. 11 1. 11 1	7.7%
(Came of Lot	eign Eimiten (Jaointy Company; must ment	le "Limited Liability Company," "L.L.C.," or "L	LC.")
(If name unavailable, enter a	ulternate name adopted for the purpose of tran	isacting business in Florida. The alternate name	must include "Limited
2 Delaware	3,		
	of which foreign limited liability	(FEI number, if applicable)	
4.	(Data Front Income 1 Line)		
	(Date first transacted business in FI (See sections 605.0904 & 605.0905, I	ontal, it prior to registration.) S. to determine penalty liability)	- Pe
5. 3920 Birch Street, Ste	. 103		57
Newport Beach, CA 9			16
	(Street Address of Principa	Office)	60 000
6. 3920 Birch Street, Ste.	103	<u> </u>	E in
Newport Beach, CA 9	2660		5
<u></u>	(Mailing Address		AMIO: OH
7. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)	
Name:	NRAI Services, Inc.		
Office Address:	1200 South Pine Island Road, Ste 250		•
	Plantation	, Plorida 33324 (7ip code)	
	(City)	(Zip code)	
designated in this applica to complywith the provisi	glstered agent and to accept service of thon, I hereby accept the appointment a ons of all statutes relative to the proper	process for the above stated limited liability is registered agent and agree to act in this c and complete performance of my duties, a	capacity. I further agree
accept the obugations of t	my position as registered agent.	P	
	(Registered age	AReni	
	(Kegisteren age	are abilitatine) direct	
-	acity and address of the person(s) who ha	- "	
All duly authorized officers of	of its Manager. Affordable Housing Access, i	nc 3920 Birch Street, Ste. 103, Newport Beach	, CA 92660
		•	. •
			
			
 Attached is a certificate jurisdiction under the law of the translator must be st 	of which it is organized. (If the certificat	duly authenticated by the official having cus e is in a foreign language, a translation of the	stody of records in the e certificate under oath
	Signature of an au	therized person	
This document is executed	in accordance with section 605,0203 (1)) (b), Florida Statutes, I am aware that any fa	lise information
submitted in a document to		ird degree felony as provided for in s.817.15	75, F.S.
	William W. Hirsch	•	

Typed or printed name of signee

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "AHA SOUTHEAST, 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 SEVENTEENTH DAY OF AUGUST, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES

HAVE BEEN ASSESSED TO DATE.

10: 04

00 0846

Authentication: 202845608

Date: 08-17-16

6104856 8300 SR# 20165410846

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