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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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DEPARTMENT OF THE

SEP 1.4 2015 O. BRIJCE CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195	
REFERENCE : 288238 760421	.5
AUTHORIZATION: Spulle Renan	ノ
COST LIMIT : \$ 125.00	
ORDER DATE : September 12, 2016	
ORDER TIME : 9:16 AM	
ORDER NO. : 288238-010	
CUSTOMER NO: 7604215	
FOREIGN FILINGS	S I
NAME: SLH CLERMONT FL LANDLORD, LLC	œ O
XXXX QUALIFICATION (TYPE: LL)	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	

EXAMINER:

CONTACT PERSON: Melissa Zender -- EXT# 62956

COVER LETTER

TO:	Registration Section Division of Corporatio	ns	٠.					:
SUBJE	ECT: SLH Clermont F							
		N	ame of Limi	ted Liability Comp	any			
	closed "Application by F ice, and check are submit							
Please	return all correspondence	e concerning this n	natter to the	following:				
	Allison McLe	od		,				
			Nai	ne of Person			-	
	SunTrust Eq	uity Funding, LLC		,				
			Fin	m/Company	•,		-	
	3333 Peacht	ree Road, 10th F	loor				_	
			٠	Address _.			_	
	Atlanta, Geo	rgia 30326						
	 		City/Sta	ite and Zip Code		<u>-</u>	_	
	karen.king@	suntrust.com					29	
	·	E-mail address:	(to be used	for future annual re	eport notification)	2	- 3182	- Langua
For fur	ther information concern	ning this matter, ple	ease call:			A 200	JEP 1	
	Karen King			at (439-7662			174.9
	Nan	ne of Person		Area Code	Daytime Telepl	hone Number:	-> ∞	
	MAILING ADDRES Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314	ons	Division Registra Clifton 1 2661 Ex	T ADDRESS: n of Corporations ation Section Building secutive Center Cir ssee, FL 32301	cle	AGA	¥; 5.1	
Enclo	osed is a check for the \$125.00 Filing Fee		ling Fee &	□ \$155.00 Filin	_	0.00 Filing Fee, Status & Certifie		ate

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:

SLH Clermont FL Landlord, 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 and consent of the managers or managing members adopting the alternate name. The alternate name must incompany," "L.L.C," "LLC.")	attach a copy of the volude "Limited Liabilit	vritten ty
2. Delaware 3.		
2. Unrisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applied to app	able)	•
4. N/A		
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		•
5. 3333 Peachtree Road, 10th Floor		_
Atlanta, Georgia 30326	2016 TALE:	
(Street Address of Principal Office)	SEP AHA	1
6. 3333 Peachtree Road, 10th Floor	SS Y	_ f**
Atlanta, Georgia 30326		
(Mailing Address)	င္ဘာ္တို့ တဲ့	
7. The name, title or capacity and address of the person(s) who has/have authority to		
	9 . —	
Allison McLeod, Manager, 3333 Peachtree Road, 10th Floor, Atlanta, Georgia 30326		
·		
		-
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the offici in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate it translation of the certificate under oath of the translator must be submitted.)		
Signature of an authorized person		
(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirm	ation under the	
penalties of perjury that the facts stated herein are true. I am aware that any false information document to the Department of State constitutes a third degree felony as provided for	on submitted in a	
Allison McLeod		

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of	f the Limited Liability Company is:			
SLH Clermont F	L Landlord, LLC			
If unavailable,	the alternate to be used in the state of Florida is:			
2. The name a	nd the Florida street address of the registered agent and office are:	THE AN	2019	
	Corporation Service Company	HASS.		
	(Name)		> [T	1
	1201 Hays Street	<u> </u>	လ ထဲ	-
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	Ör.	<u></u>	
	Tallahassee FL 32301			
	City/State/Zip			

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

Corporation Service Company

By:

(Signature)

Melissa Zender

Asst. Vice President

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SLH CLERMONT FL LANDLORD, 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 TWELFTH DAY OF SEPTEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SLH CLERMONT FL LANDLORD, LLC" WAS FORMED ON THE TWELFTH DAY OF SEPTEMBER, A.D. 2016.

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

Authentication: 202977428

Date: 09-12-16

6149851 8300 SR# 20165749399