M16000001681

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer: Reject Cert UX047 Like Capacity address O1114							
W16000058931							

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DIVISION OF CORPORATIONS 16 SEP 26 AH 9:

O SIMMONS SEP 28 2016



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 8, 2016

HEATHER CLARK 1125 S 103RD ST, STE 800 OMAHA, NE 68124

SUBJECT: LYNCH CONDO FLORIDA, L.L.C.

Ref. Number: W16000058931

We have received your document for LYNCH CONDO FLORIDA, L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Octavia I Simmons Regulatory Specialist II

Letter Number: 316A00018974



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 25, 2016

HEATHER CLARK 1125 S 103RD ST, STE 800 OMAHA, NE 68124

SUBJECT: LYNCH CONDO FLORIDA, L.L.C.

Ref. Number: W16000058931

7116 SEP -6 PH 4: 22

We have received your document for LYNCH CONDO FLORIDA, L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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 60 days or your filing will be considered abandoned.

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

Octavia I Simmons Regulatory Specialist II

Letter Number: 016A00018073

COVER LETTER

2.,	ision of Corporation Lynch Condo Florid								
SUBJECT:			inited fibrilles						
		Name of I	imited Liability (ompany					
		eign Limited Liability Comp d to register the above refere							
Please return	n all correspondence o	oncerning this matter to the	following:						
	Heather Clark								
		Name of Person							
	Koley Jessen P.C., L.L.O.								
	Firm/Company								
	1125 S 103rd S	1125 S 103rd Street, Suite 800							
		· · · · · · · · · · · · · · · · · · ·	Address						
	Omaha, Nebras	Omaha, Nebraska 68124							
	City/State and Zip Code								
	Heather, Clark@k	oleyjessen.com							
		E-mail address: (to be used	for future annual	report not	ification)				
For further i	nformation concerning	g this matter, please call:							
Ta	ylor C. Dieckman		402 at (390-950	00				
water	Name o	f Contact Person	Area Code	Day	time 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							
	a check for the follow \$125.00 Filing Fee	ing amount: ☐ \$130,00 Filing Fee & Certificate of Status	S155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Ce of Status & Certified Cop.				

16 SEP 26 AH 9: 35

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

COMPANYTO TRANSACT BU	SINESS IN THE STATE OF		ING ISSUBMITTED TO REGISTER A FOR	
Lynch Condo Florida, L (Nama of Fore		pany; must include "Lim	ited Liability Company," "L.L.C.," or "LL	C."}
(If asmo unaveilable, enter all Liability Company," "L.L.C.,"		he purpose of transacting	business in Florida. The alternate name m	ust include "Limited
2. Nebraska		1		
(Jurisdiction under the law company is organized)	of which foreign limited i	ability	(FEI number, if applicable)	
4. June 30, 2016				
161 Office Plans Du Co			prior to registration.) stermine penalty liability)	
5. 155 Office Plaza Dr. St	ute W. Tettatiansea, Plo	mm 32301		<u>.</u>
				DIVISION OF CORT CENTIONS
_ 155 Office Piaza Dr. St	•	ddress of Principal Office)	2
6. 133 Other Flazz Dr. Gu	no W. Landerstock Cross	100 32301		= -
		<u> </u>		Con
		(Mailing Address)		ar C
7. Name and atreet address	s of Florida registered a	agent: (P.O. Box <u>NOT</u>	_acceptable)	<u></u>
Name:	Registered Agent Sol	utions, Inc.		<u> </u>
Office Address:	155 Office Plaza Dr Suite A			ਨਾ `
	Tallahassee		, Florida <u>32301</u>	
Registered agent's accep		(City)	(Zip cods)	
designated in this applica	tion, I hereby eccept the one of all statutes relation my position as register	e appointment as regis ive to the proper and c	s for the above stated limited liability stared agent and agree to act in this complete performance of my duties, as grature)	apacity. I further agree
8. The name, title or capt	city and address of the	person(s) who has/have	suthority to manage is/are:	
	· .	- /	Omaha, Nebraska 68136	-
Dennis Lynch, M	lanager, 16808	Willow Street,	Omaha, Nebraska 68136	
Todd Lynch, Ma	nager, 16808 W	illow Street, Or	maha, Nebraska 68136	
9. Attached is a certificate	of existence, no more t	han 90 days old, duly a	uthenticated by the official having ous a foreign language, a translation of th	tody of records in the scartificate under oath
This document is executer submitted in a document to	the Department of Sta	stion 605.0203 (1) (b), i te constitutes a third de	Florida Statutes. I am aware that any fa gree felony as provided for in s.817.13 — Manager signee	ise information 5, F.S.

STATE OF NEBRASKA

United States of America, State of Nebraska ss {

Secretary of State State Capitol Lincoln, Nebraska

I, John A. Gale, Secretary of State of the State of Nebraska, do hereby certify that

LYNCH CONDO FLORIDA, L.L.C.

was duly formed under the laws of Nebraska on June 30, 2016;

all fees, taxes, and penalties due under the Nebraska Uniform Limited Liability Company Act or other law to the Secretary of State have been paid;

the Company's most recent biennial report required by section 21-125 has been filed by the Secretary of State;

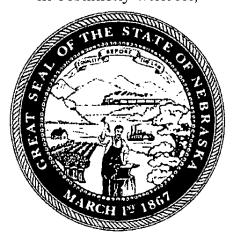
the Secretary of State has not administratively dissolved the company;

the Company has not delivered to the Secretary of State for filing a Statement of Dissolution;

a Statement of Termination has not been filed by the Secretary of State.

This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's financial condition or business activities and practices.

In Testimony Whereof,



I have hereunto set my hand and affixed the Great Seal of the State of Nebraska on this date of

August 31, 2016

Secretary of State