

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGENCY CENTERS
Account Number : I20040000052
Phone : (904)598-7000
Fax Number : (904)354-1832

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: jonibonnell@regencycenters.com

Foreign Limited Liability Company Columbia II Plaza Venezia, LLC

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Corporate Filing Menu

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**OCT** 1 1 2016

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

, Columbia II Plaza Ver	USINESS IN THE STATE OF FLORIDA: nezia, LLC		
4.	eign Limited Liability Company; must include	Limited Liability Company," "L.L.C.," or "LL	·C.")
Liability Company," "L.L.C.	Itemate name adopted for the purpose of transa," or "LLC.")	cting business in Florida. The alternate name m	oust include "Limited
2. Delaware		a	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
4. October 4, 2016			
	(Date first transacted business in Floric (See sections 603.0904 & 605.0905, F.S.	la, if prior to registration.) to determine penalty liability)	
One Independent Driv			5
·			Sion OC
Jacksonville, Florida 3	2202 (Street Address of Principal O	Rice)	9 -
6. One Independent Drive	•		16 OCT 10 AH 8: 57
			<b>3 3</b>
Jacksonville, Florida 3	·	······································	<sup>ပို့</sup> (အ
	(Mailing Address)		= 5
<ol><li>Name and street address</li></ol>	ss of Florida registered agent: (P.O. Box )	IOT_acceptable)	**
Name:	F&L Corp.		
Office Address:	One Independent Drive, Suite 1300		
	Jacksonville	, Florida 32202 (Zip code)	
	(City)	(Zip code)	
lesignated in this applica o complywith the provision	gistered agent and to accept service of pro tion, I hereby accept the appointment as r ons of all statutes relative to the proper an my position as registered agent.	egistered agent and agree to act in this ca	pacity. I further agree d I am familiar with and
	(Registered agent'	s signature) Authorized Signatur	y for FAL Corp
8. The name, title or caps	acity and address of the person(s) who has/l	nave authority to manage is/are:	
Regency Centers, L.P., M			
One Independent Drive, S	Suite 114		
Jacksonville, Florida 3220	02		
Attached is a certificate urisdiction under the law of the translator must be su	of existence, no more than 90 days old, du of which it is organized. (If the certificate is abmitted)    Called Signature of an author	s in a foreign language, a translation of the	ody of records in the ecrtificate under oath
This document is executed	Lin accordance with section 605.0203 (1) (h	). Florida Statutes, I am aware that any fal:	se information
ubmitted in a document to	the Department of State constitutes a third	degree felony as provided for in s.817.155	5, F.S.
	Kathy D. Miller		
	Typed or printed nam	e of siRucc	



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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COLUMBIA II PLAZA VENEZIA, 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 TENTH DAY OF OCTOBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COLUMBIA II PLAZA VENEZIA, LLC" WAS FORMED ON THE FOURTH DAY OF OCTOBER, A.D. 2016.

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

6172344 8300 SR# 20166132354

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

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Date: 10-10-16

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#293 P.002/004

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October 6, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

REGENCY CENTERS

SUBJECT: COLUMBIA II PLAZA VENEZIA, LLC

REF: W16000068721

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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.

Deborah Bruce Regulatory Specialist II FAX Aud. #: H16000247855 Letter Number: 716A00021574

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