	(Requestor's Name)
-	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	P MAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:





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D. SCOTT DEC 2 9 2016

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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 27, 2016

CORPORATE ACCESS 1701 DIRECTORS BLVD SUITE 300 AUSTIN, TX 78744

SUBJECT: LG 301 AND SUMMERFIELD NORTH, LLC

Ref. Number: W16000085813

We have received your document for LG 301 AND SUMMERFIELD NORTH, LLC and your check(s) totaling \$250.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Dionne M Scott Regulatory Specialist II

Letter Number: 816A00027369

CORPORATE ACCESS,	When you need ACCESS
INC.	236 East 6th Avenue. Tallahassee,

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

to the world

WALK IN		
PICK UP: 12/23		
	CERTIFIED COPY PHOTOCOPY CUS	
1.	FILING FOVEIGN LG 301 AND Summerfield North, LLC (CORPORATE NAME AND DOCUMENT #)	
2.	(CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #)	
3.	(CORPORATE NAME AND DOCUMENT #)	
4.	(CORPORATE NAME AND DOCUMENT #)	
5.	(CORPORATE NAME AND DOCUMENT #)	
6.	(CORPORATE NAME AND DOCUMENT #)	
SPECIA INSTRU	L CTIONS:	

COVER LETTER

	gistration Section vision of Corporations
SUBJECT	LG 301 and Summerfield North, LLC
	Name of Limited Liability Company
	ed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please retur	n all correspondence concerning this matter to the following:
	Ryan DeAnda
	Name of Person
	Registered Agent Solutions, Inc.
	Firm/Company
	1701 Directors Blvd Suite 300
	Address
	Austin TEXAS 78744
	City/State and Zip Code
	ars@rasi.com
	E-mail address: (to be used for future annual report notification)
For further	information concerning this matter, please call:
عند.	Scott Parr at (214) 865-8093 F F F F Area Code Daytime Telephone Number F F F F F F F F F F F F F F F F F F F
Di Re P.	AILING ADDRESS: vision of Corporations gistration Section D. Box 6327 Clifton Building Clif
	a check for the following amount: \$125.00 Filing Fee \$\Bigsize \$\$130.00 Filing Fee & \Bigsize \$\$155.00 Filing Fee & \Bigsize \$\$160.00 Filing Fee, Certificate Certificate of Status

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

IN CUMPLIANCE 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: LG 301 and Summerfield North, 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. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 2301 Cedar Springs Road Suite 200 Dallas, TX 75201 (Street Address of Principal Office) 2301 Cedar Springs Road Suite 200 Dallas, TX 75201 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Registered Agent Solutions, Inc. Name: 155 Office Plaza Dr. Suite A Office Address: Tallahassee Florida 3230 Registered agent's acceptance: 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 application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered age 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: LG Capital, LLC - Manager - 2301 Cedar Springs Road Suite 200 Dallas, TX 75201 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of an authorized person

Will Tolliver, Authorized Signatory of LG Capital, LLC, Manager

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for LG 301 and Summerfield North, LLC (file number 802606491), a Domestic Limited Liability Company (LLC), was filed in this office on December 16, 2016.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on December 23, 2016.



Phone: (512) 463-5555

Prepared by: SOS-WEB



Come visit us on the internet at http://www.sos.state.tx.us/ Fax: (512) 463-5709

ax; (512) 463-5709 TID: 10264 Dial: 7-1-1 for Relay Services Document: 705864980003