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K. SALY JAN 1 0 2017 January 4, 2017

Florida Division of Corporation,

I am filing on behalf of my client, Jeff Gregor and Capital Square 1031. Please find enclosed filing requests for two (2) Delaware entities qualifying as Florida foreign entities, along with required certificate of existence from DE for each entity, and a check for \$260.00 (\$130 for each LLC registration and a certificate of status). Please return any and all confirmation documents of the filing along with certificate of status ordered in the UPS overnight envelope provided.

I called on January 4, 2017 and talked to a rep that said I could provide this return, overnight envelope for a faster delivery. If this is a problem or it is not possible to return the documents in this overnight envelope, please contact me ASAP.

Thanks so much for your help!

Sincerely,

Chris Sorensen – Owner Sorensen Entity Services, LLC

12430 Spring Run Road Chesterfield, VA 23832

804-763-9320

chris@sorensenes.com

## **COVER LETTER**

TO: Registration Section Division of Corporations						
CS1031/Kay Alexander Pointe Apartments ST, LLC SUBJECT:						
Name of Limited Liability Company						
The enclo	osed "Application e, and check are s	n by Foreign Limited Liability Computer the body in by Foreign Limited to register the above reference.	pany for Authorization to Tra enced foreign limited liability	ansact Business in Florida," Certificate of y company to transact business in Florida		
Please re	turn all correspor	ndence concerning this matter to the	following:			
	Chris S	Chris Sorensen				
	Name of Person					
	Sorense	Sorensen Entity Services LLC				
	Firm/Company					
	12430 5	12430 Spring Run Road				
	Address					
	Chester	Chesterfield, VA 23832				
	City/State and Zip Code					
chris@sorensenes.com						
	E-mail address: (to be used for future annual report notification)					
For furth	er information co	ncerning this matter, please call:				
Chris Sorensen		804 763-93	20			
•		Name of Contact Person	_ `	rtime 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				
	is a check for the □ \$125.00 Filing	e following amount: g Fee  \$\Bigsis \$\\$130.00 \text{ Filing Fee & }\$ Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy		

## 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: C\$1031/Kay Alexander Pointe Apartments ST, 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.") Delaware (Jurisdiction under the law of which foreign limited liability 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) 10900 Nuckols Road, Suite 200, Glen Allen, VA 23060 (Street Address of Principal Office) 10900 Nuckols Road Suite 200, Glen Allen, VA 23060 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) InCorp Services, Inc. Name: 17888 67th Court North Office Address: Loxabatchee (City) 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 agent. Leora Nealey on behalf of InCorp Services, Inc. (Begistered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Jeffrey A. Gregor, Manager, 10900 Nuckols Road, Suite 200, Glen Allen, VA 23060 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) Signature of an authorized person 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. Jeffrey A. Gregor

Typed or printed name of signee

**Delaware** 

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "CS1031/KAY ALEXANDER POINTE APARTMENTS

ST, 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 TWENTY-THIRD DAY OF DECEMBER, A.D.

2016.





6259778 8300 SR# 20167250787 Authentication: 203582844

Date: 12-23-16

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