# M170000003522

(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: 3124/17 Title per Paran & Thanas De

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#### SPAIN & GILLON, LLC

The Zinszer Building 2117 Second Avenue North Birmingham, Alabama 35203-3753

> Telephone (205) 328-4100 Facsimile (205) 324-8866

Aaron B. Thomas

Direct Dial: (205) 581-6218

abt@spain-gillon.com

March 22, 2017

#### **VIA FEDERAL-EXPRESS OVERNIGHT**

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Arlington Cypress Creek, LLC

Dear Sir or Madam:

Enclosed for filing in your office is the Application by Foreign Limited Liability Company For Authorization to Transact Business in Florida. Also enclosed is our check in the amount of \$160.00 for the Filing Fee, Certificate of Status, and Certified Copy.

Please contact me with any questions or if I can be of any assistance.

Yours very truly,

SPAIN & GILLON, L.L.C.

By:

Aaron B. Thomas

ABT/kp Enclosures

#### **COVER LETTER**

Registration Section
Division of Corporations

TO:

SUBJECT	Arlington Cypress C	rcek, LLC								
30000201	*	Name of Limited Liability Company								
The enclos Existence,	ed "Application by For and check are submitted	eign Limited Liability Comp d to register the above refere	any for Authoriza nced foreign limit	ition to Tra ted liability	nsact Business in Florida," company to transact busin	Certificate of ess in Florida				
Please retu	rn all correspondence c	oncerning this matter to the	following:							
	Aaron Thomas									
	Name of Person									
	Spain & Gillon,	LLC								
	Firm/Company									
	2117 Second Av	venue North	~							
Address										
	Birmingham, Alabama 35203									
	City/State and Zip Code									
	abt@spain-gillon									
		E-mail address: (to be used	for future annual	report noti	fication)					
For further	information concerning	this matter, please call:								
Α	aron Thomas		205 at (	328-410	00					
	Name of	Contact Person	Area Code	Dayı	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 followi \$125.00 Filing Fee	ng amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy	ig Fee &	\$160.00 Filing Fee, Co of Status & Certified Cop					

### 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 RUSINESS. IN THE STATE OF FLORIDA:

Arlington Cypress Cre	ek, LLC eign Limited Liability Company; mu		imited Liability Com-		7 - 41 C 9\	
(Name of Port	eigh chilico claothly Company, inc	ist include. L	mined Liability Comp	any, L.L.C.,	OF LEC. )	
If name unavailable, enter a Liability Company," "L.L.C.	itemate name adopted for the purpos	se of transact	ing business in Florida	. The alternate	name must includ	le "Limited
Alabama	,	, 82-	0816774			
(Jurisdiction under the law of which foreign limited liability company is organized)				nber, if applica	ible)	
No business prior to re	gistration					
•	(Date first transacted busine (See sections 605.0904 & 605	ess in Florida	, if prior to registration	1.)	<del>,</del>	
2117 Second Avenue l						
Birmingham, Alabama	35203					
	(Street Address of	Principal Off	ice)			
2117 Second Avenue N	forth				25	
Birmingham, Alabama	35203		···			مونستون ومونستون کی کی
<del></del>	(Mailing	Address)				m
. Name and street addres	ss of Florida registered agent: (P	O. Box NO	OT acceptable)		ia v	111
Name:	C T Corporation System		<u> </u>		STATE STATE	
Office Address:	1200 South Pine Island Road				OI :	
	Plantation		, Florida	33324		. •
	(City)		, 1 101100	(Zip code)		
esignated in this applicat complywith the provision	gistered agent and to accept ser tion, I hereby accept the appoint ons of all statutes relative to the my position as registered agent.	tment as reg	cistered agent and a complete performa Scott White	gree to act in nce of my du	this capacity. I	further a
	(Regist	tered agent's	signature)		<del></del>	
The name, title or capa	acity and address of the person(s)	who has/ha	ve authority to mans	age is/are:		
Arlington Properties, Inc.	ucohieo		•	<b>J</b>		
117 Second Avenue Nor	th					
Birmingham, Alabama 35	203	<del></del>				
. Attached is a certificate urisdiction under the law of the translator must be su	Maxwee	ertificate is	in a foreign language	e official havi	ing custody of re	cords in th te under o
his document is executed ubmitted in a document to	in accordance with section 605.0 the Department of State constitu	of an authori 0203 (1) (b), ites a third d	, Florida Statutes. I a	m aware that ided for in s.8	any false inform 817.155, F.S.	ation

Typed or printed name of signee

John H. Merrill Secretary of State

P.O. Box 5616 Montgomery, AL 36103-5616

## STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Arlington Cypress Creek, LLC was formed in Jefferson County, Alabama on March 10, 2017. The Alabama Entity Identification number for this entity is 385-727. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20170320000035104

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

3/20/2017

Date

J. H. Menill

John H. Merrill

Secretary of State