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(Requesto	or's Name)
(Address)	
(Address)	
(City/State	e/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	s Entity Name)
(Docume	nt Number)
Certified Copies	Certificates of Status
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MAY 2 5 2017 S. YOUNG



RECEIVED

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 651342 8006967

AUTHORIZATION : Sorell Bleman

COST LIMIT : \$(160.00

ORDER DATE: May 19, 2017

ORDER TIME : 3:25 PM

ORDER NO. : 651342-005

CUSTOMER NO: 8006967

FOREIGN FILINGS

NAME: ASHLEY LAKE FEE OWNER LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

COVER LETTER

TO: Registration Section
Division of Corporations

_ ASHLEY LAKE FEE OWNER LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Karen Millan
Name of Person
TruAmerica Properties
Firm/Company
12100 Wilshire Boulevard, Suite 250
Address
Los Angeles, CA, 90025
City/State and Zip Code
kmillan@truamerica.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karen Millan

,424

325-2777

Name of Contact Person

Area Code

Daytime 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

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 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: L ASHLEY LAKE FEE OWNER LLC (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name anavailable, core atternate name adopted for the purpose of transacting tusiness in Florida. The ahermate name mest include "Limited Lightlin, Company," "LLC," or "LLC,") (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 monelty 6. 12100 Wilshire Boulevard 5. 12100 Wilshire Boulevard (Street Address of Principal Office) (Mailing Address) Suite 250 Suite 250 Los Angeles, CA, 90025 Los Angeles, CA, 90025 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee , Florida 32301 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 comply with the provisions of all statutes calculated the comply with the provisions of all statutes calculated the comply with the provisions of all statutes calculated the comply with the provisions of all statutes calculated the comply with the provisions of all statutes calculated the comply with the provisions of all statutes calculated the comply with the provisions of all statutes calculated the complex with the provisions of all statutes calculated the complex with the provisions of all statutes calculated the complex with the provisions of all statutes calculated the complex with the provisions of all statutes calculated the complex with the provisions of all statutes calculated the complex with the provisions of all statutes calculated the complex with the provisions of all statutes calculated the complex with the provisions of all statutes calculated the complex with the provisions of all statutes calculated the complex with the provisions of all statutes calculated the complex with the provisions of all statutes calculated the complex with the provisions of all statutes calculated the complex with the provisions of all statutes calculated the complex with the provisions of the complex with the provisions of the complex with the complex with the provisions of the complex with the c to comply with the provisions of all statutes relative to the proper and Complete performance of my duties, and 1 am familiar with 🔀 and accept the obligations of my hostition as registered agent. Judith Reyes ssistant Secretary (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Authorized Signatory Karen Millan Author Lake Fee Dwner LLC 17100 Wilder Boulevard, Rule 750, Les Angeles CA 80025 (Use attachments if necessary) 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) mure of an authorized person 10. 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.

Typed or printed name of signer

Karen Millan

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ASHLEY LAKE FEE OWNER 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 NINETEENTH DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ASHLEY LAKE FEE OWNER LLC" WAS FORMED ON THE ELEVENTH DAY OF MAY, A.D. 2017.

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

77 MAY 24 AM 10: 32

6408680 8300

SR# 20173772932
You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202573436

Date: 05-19-17