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(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:				

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SECONDARY OF STATE

04 :1 :1 : 40

S. WARREN JUL 2 1 2017 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 3230 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 732948 8049580

AUTHORIZATION :

COST LIMIT : \$ 1/2/5, 00

ORDER DATE : July 19, 2017

ORDER TIME : 9:38 AM

ORDER NO. : 732948-005

CUSTOMER NO: 8049580

FOREIGN FILINGS

NAME: LANDMARK URBAN CONSTRUCTION

TALLAHASSEE, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

COVER LETTER

TO:

Registration Section
Division of Corporations

_{suвјест:} Landmark Urban Construction Tallahassee, 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:

Carol McEwen
Name of Person
Baker & Hostetler LLP
Firm/Company
1170 Peachtree Street, Suite 2400
Address
Atlanta, GA 30309
City/State and Zip Code
joel.gregory@landmarkproperties.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carol McEwen

...404

256-8245

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, F1, 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 TLIMITED (LABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

)
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in F	lorida. The alternate raune must include "Limited Lin	bility Company," "L.L.C," or "LLC.")
2. Delaware		3. <u>82-17</u>	36109
(Jurisdiction timeer the law of wi	ich foreign linuted liability company is organized)	(Fill man)	ber, (l'applicable)
_{4.} <u>n/a</u>			
	(Date first transacted business in Florida, if prior t (See sections 605,0904 & 605,0905, F.S. to deter	o registration.) nine penalty hability)	
5. 315 Oconee Street		6. 315 Oconee Street	
(Street Address of F Athens, GA 30601	hincipal Office)	(Mailing Add	iress)
Athens, GA 30001		Athens, GA 30601	
		•	77
/. Name and street addres	s of Florida registered agent: (P.O. Bo	x <u>NOT</u> acceptable)	
Name:	Corporation Service Company		20 20
Office Address:	1201 Hays Street		
Office retailed.			
	Tallahassee	, Florida 32301 (Zip cod	<u> </u>
Registered agent's accep	(City)	(Zip cod	8 8 8 5 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	of my position as registered agent.	r and complete performance of my	-
and accept the obligations 8. The name, title or capa	cof my position as registered agent. Registered agent's edity and address of the person(s) who had	as/have authority to manage is/are:	Melissa Zender Asst: Vice President
8. The name, title or capa	eity and address of the person(s) who h	s signature)	Melissa Zender
and accept the obligations 8. The name, title or capa	eity and address of the person(s) who hame and Address: JWR Manager, LLC	as/have authority to manage is/are:	Melissa Zender Asst: Vice President
8. The name, title or capa	eity and address of the person(s) who h	as/have authority to manage is/are:	Melissa Zender Asst: Vice President
8. The name, title or capa	eity and address of the person(s) who hame and Address: JWR Manager, LLC 315 Oconee Street	as/have authority to manage is/are:	Melissa Zender Asst: Vice President
8. The name, title or capa	eity and address of the person(s) who hame and Address: JWR Manager, LLC 315 Oconee Street	as/have authority to manage is/are:	Melissa Zender Asst: Vice President
8. The name, title or capa	eity and address of the person(s) who hame and Address: JWR Manager, LLC 315 Oconee Street	as/have authority to manage is/are:	Melissa Zender Asst: Vice President
8. The name, title or capa Title or Capacity: Manager	city and address of the person(s) who hame and Address: JWR Manager, LLC 315 Oconee Street Athens, GA 30601	as/have authority to manage is/are:	Melissa Zender Asst: Vice President
8. The name, title or capa Title or Capacity: Manager (Use attachments if necess)	eity and address of the person(s) who have and Address: JWR Manager, LLC 315 Oconee Street Athens, GA 30601 ary) of existence, no more than 90 days old, of which it is organized. (If the certifical bimitted)	duly authenticated by the official ha	Melissa Zender Asst: Vice President Name and Address:

Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "LANDMARK URBAN CONSTRUCTION

TALLAHASSEE, 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

JULY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LANDMARK URBAN CONSTRUCTION TALLAHASSEE, LLC" WAS FORMED ON THE FOURTH DAY OF MAY, A.D. 2017.

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

Authentication: 202914534

Date: 07-19-17

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