

M17000000421

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H17000259261 3)))



H170002592613ABCO

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6393

From: Account Name : LOWMEYER, DROSBICK, LOSTER, KANTOR & REED, P.A.
Account Number : 072720000036
Phone : (407) 643-4600
Fax Number : (407) 643-4444

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

Foreign Limited Liability Company
LIFEBUILT ARCHITECTURE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

2017 OCT -2 PM 6:58

FILED

FILED
OCT -2 AM 6:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu

HelpD SCOTT
OCT 3 2017

Lowndes
Drosdick
Doster &
Kantor
Reed, P.A.

215 NORTH EOLA DR
ORLANDO, FLORIDA 32801

450 SOUTH ORANGE AVENUE, SUITE 200
ORLANDO, FLORIDA 32801

ATTORNEYS
AT LAW

III MERITAS LAW FIRMS WORLDWIDE

POST OFFICE BOX 2809, ORLANDO, FLORIDA 3202-2809
TEL.: 407-329-4600 / FAX.: 407-843-4444
www.lowndes-law.com

From:

Name: Andre, Gail
Fax Number: 407-843-4444

To:

Name: DIVISION OF
CORPORATIONS
Company:
Fax Number: 1-850-617-6383

Subject

Comments

FILED
OCT -2 AM 6:04
SECRET
FEDERAL BUREAU OF INVESTIGATION
U.S. DEPARTMENT OF JUSTICE

Date and time of transmission: 10/2/2017 4:37:23 PM

Number of Pages: 3

If you did not receive all of the pages, please contact us as soon as possible.

The information contained in this transmission is attorney privileged and confidential. It is intended only for the use of the individual or entity named above. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution or copy of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone collect and return the original message to us at the above address via the U.S. Postal Service. We will reimburse you for postage.

Thank you

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:

1. LIFEBUILT ARCHITECTURE, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC.")

2. DELAWARE

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 37-1788360

(FEI number, if applicable)

4. UPON FILING OF THIS APPLICATION

(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S., to determine penalty liability)

5. 445 24TH STREET, SUITE 300

(Street Address of Principal Office)

VERO BEACH, FLORIDA 32960

6. 445 24TH STREET, SUITE 300

(Mailing Address)

VERO BEACH, FLORIDA 32960

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: JOAN T. WILLIAMS

Office Address: 445 24TH STREET, SUITE 300

VERO BEACH

(City)

, Florida 32960

(Zip code)

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 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.

(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:

MANAGER

JM WATERCREST, LLC

445 24TH STREET, STE 300

VERO BEACH, FL 32960

(Use attachments if necessary)

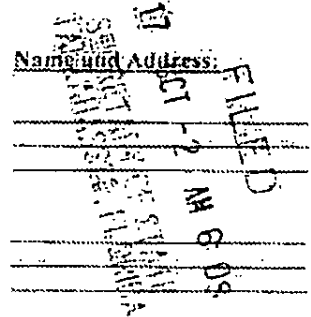
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

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.

JOAN T. WILLIAMS

(Signature of an authorized person)

(Typed or printed name of signer)



Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LIFEBUILT ARCHITECTURE, 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 SECOND DAY OF OCTOBER, A.D. 2017.

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

RECEIVED
OCT - 2 AM 6:03
SECRETARY OF STATE
DELAWARE



Jeffrey W. Bullock
Jeffrey W. Bullock, Secretary of State

5787128 8300

SR# 20176432374

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

Authentication: 203326989

Date: 10-02-17