M17000009005

(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.

Office Use Only



700304785757

10/20/17

17 OCT 23 AM 8 OZ

17 OCT 23 PH 3: 86

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

10/23/17

NAME:

COMMONS ON ANNISTON LLC

TYPE OF FILING: APPLICATION

COST:

125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA:

name unavailable, enter alternate na	une adopted for the purpose of transacting business in Flor	rida. The alternate name must include "Limite	ed Liability Company," "L.L.C," or "LLC."	
Delaware		3 32-0544473		
(Jurisdiction under the law of which foreign limited liability company is organized)		J.	(FEI number, if applicable)	
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determine	registration.) ine penalty liability)		
5. 4550 E. Thousand Oaks Blvd., Suite 200 (Street Address of Principal Office) Westlake Village, CA 91362		6. 4550 E. Thousand Oaks Blvd., Suite 200		
		(Mailing Address) Westlake Village, CA 91362		
westake village, CA	1302	westiake vinage, CA	91302	
Name and street address	s of Florida registered agent: (P.O. Box	NOT acceptable)		
Name:	Florida Filing & Search Services, Inc.			
Office Address:	155 Office Plaza Drive			
	Tallahassee	, Florida <u>32301</u>		
	(City)	, 1 131132	p cude)	
aving been named as reg signated in this applicat comply with the provision	ance: gistered agent and to accept service of pion, I hereby accept the appointment as ons of all statutes relative to the proper of my position as registered agent.	process for the above stated lim is registered agent and agree to and complete performance of	ited liability company at the pact in this capacity. I further	
aving been named as reg esignated in this applicat comply with the provision ad accept the obligations	ance: gistered agent and to accept service of p ion, I hereby accept the appointment as ons of all statutes relative to the proper of my position as registered agent. (Registered agent's s	process for the above stated lims registered agent and agree to and complete performance of signature)	alted liability company at the part in this capacity. I further my duties, and I am familiar	
laving been named as reg esignated in this applicat a comply with the provision and accept the obligations	ance: gistered agent and to accept service of pion, I hereby accept the appointment as ons of all statutes relative to the proper of my position as registered agent.	process for the above stated lims registered agent and agree to and complete performance of signature)	alted liability company at the part in this capacity. I further my duties, and I am familiar	
laving been named as regestignated in this applicate comply with the provisional accept the obligations. The name, title or capacities or Capacity: President, Strategic	ance: gistered agent and to accept service of p ion, I hereby accept the appointment as ons of all statutes relative to the proper of my position as registered agent. (Registered agent's s eity and address of the person(s) who has Name and Address: James Backner	process for the above stated lims registered agent and agree to and complete performance of signature) s/have authority to manage is/at Title or Capacity:	ited liability company at the pact in this capacity. I further my duties, and I am familiar	
laving been named as regestignated in this application comply with the provisional accept the obligations. The name, title or capacity: President, Strategic Diversified Management	gistered agent and to accept service of pion. I hereby accept the appointment as one of all statutes relative to the proper of my position as registered agent. (Registered agent's service and address of the person(s) who have a backner agent. James Backner 4550 E. Thousand Oaks Blvd.	process for the above stated lims registered agent and agree to and complete performance of signature) s/have authority to manage is/at Title or Capacity:	ited liability company at the pact in this capacity. I further my duties, and I am familiar	
laving been named as regestignated in this applicate comply with the provisional accept the obligations. The name, title or capacities or Capacity: President, Strategic	ance: gistered agent and to accept service of p ion, I hereby accept the appointment as ons of all statutes relative to the proper of my position as registered agent. (Registered agent's s eity and address of the person(s) who has Name and Address: James Backner	process for the above stated lims registered agent and agree to and complete performance of signature) s/have authority to manage is/at Title or Capacity:	ited liability company at the pact in this capacity. I further my duties, and I am familiar	
laving been named as regestignated in this applicate to comply with the provisional accept the obligations. The name, title or capacity: President, Strategic Diversified Management	gistered agent and to accept service of pion. I hereby accept the appointment as ons of all statutes relative to the proper of my position as registered agent. (Registered agent's service and address of the person(s) who have a head address: James Backner 4550 E. Thousand Oaks Blvd. Suite 200	process for the above stated lims registered agent and agree to and complete performance of signature) s/have authority to manage is/at Title or Capacity:	ited liability company at the pact in this capacity. I further my duties, and I am familiar	
faving been named as regestignated in this applicate to comply with the provision accept the obligations. The name, title or capacity: President, Strategic Diversified Management., its Manager	city and address of the person(s) who has Name and Address: James Backner 4550 E. Thousand Oaks Blvd. Suite 200 Westlake Village, CA 91362	process for the above stated lims registered agent and agree to and complete performance of signature) s/have authority to manage is/at Title or Capacity:	ret in this capacity. I further my duties, and I am familiar Te: Name and Address:	
laving been named as regestignated in this applicate to comply with the provisional accept the obligations. The name, title or capacity: President, Strategic Diversified Management., its Manager Use attachments if necess	city and address of the person(s) who has Name and Address: James Backner 4550 E. Thousand Oaks Blvd. Suite 200 Westlake Village, CA 91362	sregistered agent and agree to and complete performance of signature) s/have authority to manage is/at Title or Capacity:	ret in this capacity. I further my duties, and I am familiar The second of the part of th	
aving been named as regestignated in this applicate comply with the provision of accept the obligations. The name, title or capacatitle or Capacity: President, Strategic Diversified Manageme Inc., its Manager Jean attachments if necess Attached is a certificate or is diction under the law of the serious provision p	sance: gistered agent and to accept service of pion. I hereby accept the appointment as ons of all statutes relative to the proper of my position as registered agent. (Registered agent's service agent's service agent's service agent's service and address of the person(s) who has a Name and Address: James Backner ent, 4550 E. Thousand Oaks Blvd. Suite 200 Westlake Village, CA 91362 ary) of existence, no more than 90 days old, of which it is organized. (If the certificate	sregistered agent and agree to and complete performance of signature) s/have authority to manage is/at Title or Capacity:	re: Name and Address:	
designated in this applicate of comply with the provision accept the obligations. B. The name, title or capacity: President, Strategic Diversified Management Inc., its Manager Use attachments if necess. Attached is a certificate of the translator must be sufficiented. D. This document is executed.	sance: gistered agent and to accept service of pion. I hereby accept the appointment as ons of all statutes relative to the proper of my position as registered agent. (Registered agent's service agent's service agent's service agent's service and address of the person(s) who has a Name and Address: James Backner ent, 4550 E. Thousand Oaks Blvd. Suite 200 Westlake Village, CA 91362 ary) of existence, no more than 90 days old, of which it is organized. (If the certificate	stregistered agent and agree to and complete performance of signature) s/have authority to manage is/at Title or Capacity: duly authenticated by the official is in a foreign language, a trans (1) (b), Florida Statutes. I am a	re: Name and Address: Name and	

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 "COMMONS ON ANNISTON 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 TENTH DAY OF OCTOBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COMMONS ON ANNISTON LLC" WAS FORMED ON THE FOURTH DAY OF OCTOBER, A.D. 2017.

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

Authentication: 203376491

Date: 10-10-17

6568863 8300 SR# 20176560953

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