# M17000009216

(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
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Certified Copies Certificates of Status				
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17 OCT 30 FH 4-29

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

100

ACCOUNT NO. : I2000000195

REFERENCE 887067 8038825

AUTHORIZATION THE Ble man

COST LIMIT : \$ 125.00

ORDER DATE: October 27, 2017

ORDER TIME : 3:10 PM

ORDER NO. : 887067-010

CUSTOMER NO: 8038825

### FOREIGN FILINGS

NAME: PROGRESS RESIDENTIAL

BORROWER 2, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

### **COVER LETTER**

	Registration Section Division of Corporation	s		
UBJEC1	T: Progress Residential			
		Name of Lir	nited Liability Company	
				Fransact Business in Florida," Certific lity company to transact business in F
ease reti	urn all correspondence c	oncerning this matter to	the following:	
	ROBYN MOLIN	NE		
			Name of Person	··· ••·
	PROGRESS RE	SIDENTIAL, LLC		
	Firm/Company			
	P.O. BOX 4090			
			Address	
	SCOTTSDALE,	AZ 85261		1
		Ci	ty/State and Zip Code	
	RMOLINE@PRO	OGRESSRESIDENTIA		
		E-mail address; (to be	used for future annual report noti	fication)
or furthe	r information concerning	this matter, please call	:	
ļ	ROBYN MOLINE		at / 480 \ 459-;	2446
_	Name o	l Contact Person	Area Code	2446 Daytime Telephone Number
R P	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 'allahassee, FL 32314	Div Reg Clif 266	REET ADDRESS: ision of Corporations istration Section from Building 1 Executive Center Circle ahassee, FL 32301	
	d is a check for the f □ \$125.00 Filing Fee	ollowing amount:  1 \$130.00 Filing Fee Certificate of Status		□ \$160.00 Filing Fee, Certificate of Status & Certified Copy

TO:

## 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:

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LL.C.")	
(If name unavailable, enter afternate name adopted for the purpose of transacting business in Florida. The afternate name must include "Limited Liability Company," "L.L.C." or "L.L.C.")	
2. DELAWARE 3.	
(Jurisdiction under the law of which foreign limited liability (FEI number, :f applicable) company is organized)	
4.	
(Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability)	
5. ATTN: LEGAL DEPT, 7500 N. DOBSON RD., SUITE 300, SCOTTSDALE, AZ 85256	
(Street Address of Principal Office)	
6. ATTN: LEGAL DEPT, P.O. BOX 4090, SCOTTSDALE, AZ 85261	٠,
် ချော် မြော် မ	$\equiv$
(Mailing Address)	Ш
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	$\Box$
Progress Residential Equity Owner 2, LLC, Sole Member, 7500 N. Dobson Rd., Suite 300, Scottsdale, AZ 35256	
8. Attached is an original 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. (A photocopy is not	
acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)	
1-6	
Signature of an authorized person	
(In accordance with section 505 0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are triangular 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.).	ae f
Terence McNally, Authorized Person	
Typed or printed name of signee	

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d). FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name	e of the Limited Liability C	ompany is:		
Progress Resid	dential Borrower 2, LLC			
If unavailab	le, the alternate to be used i	n the state of Florida is:		
2. The name	e and the Florida street add	ress of the registered agent and office are:		
	Corporation Service Comp	pany		
	12	(Name)		
	1201 Hays Street			
	Florida Street Address (P.O. Box NOT ACCEPTABLE)			
	Tallahassec	FL 32301 City/State/Zip		
liability com registered ay statutes rela	npany at the place designate gent and agree to act in this uting to the proper and comp	and to accept service of process for the above stated limited d in this certificate. I hereby accept the appointment as capacity. I further agree to comply with the provisions of all olete performance of my duties, and I am familiar with and registered agent as provided for in Chapter 605, Florida  Roxanne Turner Asst. Vice Presiden (Signature)		
	\$ 2	0.00 Filing Fee for Application 5.00 Designation of Registered Agent 0.00 Certified Copy (optional) 5.00 Certificate of Status (optional)		

Page 1

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "PROGRESS RESIDENTIAL BORROWER 2, 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 TWENTY-SEVENTH DAY OF OCTOBER, A.D.

2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PROGRESS RESIDENTIAL BORROWER 2, LLC" WAS FORMED ON THE TWELFTH DAY OF OCTOBER, A.D. 2017.

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

Authentication: 203473661

Date: 10-27-17

6577081 8300 SR# 20176820720