# M17000089296

(F	Requestor's Name)	_
	Address)	
	Address)	<u></u>
(0	City/State/Zip/Phone #)	<u>_</u>
PICK-UP	☐ WAIT	MAIL
(6	Business Entity Name)	
(1	Document Number)	
Certified Copies	Certificates of	Status
Special Instructions	to Filing Officer:	
	Office Llee Only	



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W17000081508



## **Filing Cover Sheet**

3: Florida Division of Corporations

om: Taylor Seay C/O Capitol Services, Inc.

ate: 11/1/2017

'ans#: 940038

## intity Name:

1.) Cove Home Sales - Venture I, LLC.

Articles Incorporation ( )

Articles of Dissolution ()

Conversion ()

Foreign Qualification (XX)

Limited Partnership ()

Reinstatement ()

Other ()

Articles of Amendment ()

Annual Report ()

Fictitious Name Filing ()

Limited Liability ()

Merger ()

Withdrawal / Cancellation ()

TATE FEES PREPAID WITH CHECK#1099 FOR \$30

LEASE RETURN:

ertified Copy (XX) Plain Photocopy ()

Good Standing ( )

Certificate of Fact ()

515 E. Park Ave. 2<sup>nd</sup> FL Tallahassee, FL 32301

Phone: 855-498-5500



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 13, 2017

GIOVANNA CALLEROS 4350 E CAMELBACK RD, SUITE A-100 PHOENIX, AZ 85018 US

SUBJECT: COVE HOME SALES - VENTURE I, LLC

Ref. Number: W17000081508

We have received your document for COVE HOME SALES - VENTURE I, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 254-6051.

Judy A Leggett
Regulatory Specialist II
Registration Section

Letter Number: 417A00020676

### COVER LETTER

ro:	Registration Section Division of Corporations				
SUBJE	Cove Home Sales - Venture I, LLC.				
, , , , , , ,		Name of I	Limited Liability Co	ompany	······································
	closed "Application by Foreign Limited Liab ace, and check are submitted to register the al				
lease	return all correspondence concerning this ma	itter to the	following:		
	Giovanna Calleros				
		Na	ame of Person		_
	Cove TRS - Venture 1, LLC.				
		Fi	rm/Company		
	4350 E Camelback Rd. Suite A-l	00			;
			Address		
	Phoenix, AZ 85018				
		City/St	ate and Zip Code		
	gcalleros@covecommunities.com				
	E-mail address:	(to be used	for future annual r	eport not	ification)
or fur	ther information concerning this matter, pleas	se call:			
	Giovanna Calleros		480 at (	423-570	00
	Name of Contact Person	_	Area Code	Day	time Telephone Number
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division o Registrati Clifton Bi 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ec, FL 32301
Enclose	ed is a check for the following amount:    \$\ \begin{align*}		□ \$155,00 Filing Certified Copy	Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPILANCE 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 adopted for the purpose of transacting business	in Florida The alternate name must include "Lim	ited Liability Company," "L.L.C," or "I
Oclaware		3 82-2518989	
	hich foreign limited liability company is organized)		El number, if applicable)
	(Date first transacted business in Florida, if pr (See sections 605 0904 & 605,0905, F.S. to d	rior to registration ) letermine penalty liability)	
4350 East Carnelback		6. 4350 East Camelback	Road, Suite A100
(Street Address of Phoenix, AZ 85018	Principal Office)		ing Address)
10CHX, AZ 85018		Phoenix, AZ 85018	
lame and <u>street addre</u>	ss of Florida registered agent: (P.O.	Box NOT acceptable)	
Name:	Corporation Service Company		
Office Address:	1201 Hays Street		
	Tallahassee	, Florida 3230	1
	(City)		Zip code)
ving been named as re ignated in this applica omply with the provis	otance: egistered agent and to accept service stion, I hereby accept the appointme ions of all statutes relative to the pro s of my position as registered agent.	nt as registered agent and agree to oper and complete performance o	o act in this capacity. I fur f my duties, and I am famil
ving been named as re ignated in this applica comply with the provis	egistered agent and to accept service ution, I hereby accept the appointme ions of all statutes relative to the pro	nt as registered agent and agree to oper and complete performance o	o act in this capacity. I fur f my duties, and I am famil
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Typed or printed name of signee

<u>Delaware</u>

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "COVE HOME SALES - VENTURE I, 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 THIRTY-FIRST DAY OF OCTOBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COVE HOME SALES
- VENTURE I, LLC" WAS FORMED ON THE FIFTEENTH DAY OF AUGUST, A.D.
2017.

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

6512082 8300

SR# 20176872143

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

Activate W. Bullock, Secretary of State

Authentication: 203492031

Date: 10-31-17