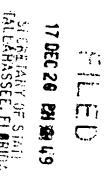
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

Date:	12/20/2017		
-		T. I20160000072	4: C
Name:	AF-Winter Park		
Document #:	-		- 17 · · ·
Order #:	10761337		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:			
Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
Fifing:	Certified: Plain: COGS:		
Availability	COGS:		

Thank you!

COVER LETTER

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TO: Registration Section Division of Corporations

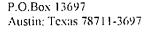
OTID IDZED	AF-Winter Park FL							
SUBJECT:	Name of Limited Liability Company							
The enclosed Existence, ar	l "Application by For nd check are submitte	reign Limited Liability Comp d to register the above refere	oany for Authoriza enced foreign limit	tion to Tra ed liability	ansact Business in Florida," Certificate of v company to transact business in Florida.			
Please return	all correspondence of	concerning this matter to the	following:					
	Catherine M. H	loover						
		N	ame of Person					
	Landes Investri	ient Group, Inc.						
	Firm/Company							
	2521 Fairmoun	t Street						
	Address							
	Dallas, Texas 7	75201						
		City/S	tate and Zip Code	-				
	cathy.hoover@la	indesgroup.com						
		E-mail address: (to be used	for future annual	report not	ification)			
For further in	nformation concernin	g this matter, please call:						
Catherine M. Hoover		214 at (572 - 20 _)	20				
	Name c	of Contact Person	Area Code	Day	time Telephone Number			
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee. FL 32301						
	a check for the follow \$125.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filir Certified Copy	ig Fee &	☐ \$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 STATUITES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. AF-Winter Park FL, LL (Name of Foreign)	.C Limited Liability Company; must include "Limited I	Liability Com	ipany," "L.L.C.," or "L.L.C.")			
(If name miavidable, enter alternate na	nne adopted for the purpose of transacting business in Florid	la. The alternate	name must include "Limited Linbi	ility Company," "L.L.C," or "LLC.")		
2. Texas		3.	82-357750)7		
(Invisduction under the law of refe	ich foreign lunited finbility company is organized)	••	(l'El munico	er, if applicable)		
4 January 2, 2018						
4. January 2, 2010	(Date first transacted birsiness in Florida, if prior to reg (See sections 605,0904 & 605,0905, F.S. to determine	pistration.)				
****	(See sections 605,0904 & 605,0905, F.S. to determine					
5. 2521 Fairmount Street 6. 25 (Street Address of Principal Office)			1 Fairmount Street	238)		
Dallas, Texas 75201	The contract of	Dail	Dallas, Texas 75201			
7. Name and street address Name:	S of Florida registered agent: (P.O. Box 1	NOT accep	otable)			
Office Address:	1200 South Pine Island Road					
	Plantation		, Florida 33324 (Zip code			
Registered agent's accep	(City)		(Zip code)		
designated in this applica to comply with the provisi and accept the obligation	igistered agent and to accept service of proton, I hereby accept the appointment as ions of all statutes relative to the proper as of my position as registered agent. By: C T Corporation System	registered and comple	agent and agree to act act of the performance of my of	in this capaciby if further agree		
	(Registered agent's tip	M.	E. Jones, Asst. Sec'y.			
8. The name, title or capa <u>Title or Capacity:</u>	acity and address of the person(s) who has Name and Address:		ority to manage is/are: or Capacity:	Name arrivaddes:		
Manager	Landes Investment Group, Inc	c.		3. •		
	2521 Fairmount Street Dallas, Texas 75201					
						
(Use attachments if neces	sary)					
9. Attached is a certificate jurisdiction under the law of the translator must be s	of existence, no more than 90 days old, d of which it is organized. (If the certificate abmitted)	luly authen is in a fore	ticated by the official ha cign language, a translat	ving custody of records in the ion of the certificate under oath		
	outed in accordance with section 605.0203 to the Department of State constitutes a thin Latherna' m. Hoover					
	Signature o	of an authorized	person			
	Catherine M. Hoover, Vice President of	Manager				
	Typed or r	printed name of	sinnec			

Corporations Section P.O.Box 13697





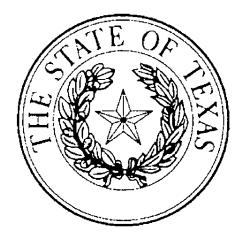
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for AF-Winter Park FL, LLC (file number 802869847), a Domestic Limited Liability Company (LLC), was filed in this office on November 28, 2017.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto sign they make officially and caused to be impressed hereoff the Seal State at my office in Austin, Texas on Decamber ? 2017.





Rolando B. Pablos Secretary of State

Dial: 7-1-1 for Relay Services Document: 782783250008