M18000003475

(Re	equestor's Name)			
(Ad	ldress)			
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(Cit	ty/State/Zip/Phone	= #)		
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(Bu	siness Entity Nan	ne)		
(Document Number)				
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M. MILLIGAN APR 1 1 2018



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 10, 2018

CT

ENT OF STATE CONTRACT LEVEL PLANT PROPERTY OF STATE OF ST

SUBJECT: VERO BEACH LEASED HOUSING ASSOCIATES III, LLC

Ref. Number: W18000033538

We have received your document for VERO BEACH LEASED HOUSING ASSOCIATES III, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return 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) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 218A00007142

2019 APR 10 PH 3: 31

CT Corp.

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

Date: 4/9/18

	Acc#I20160000072	> 1810			
Name:	Vero Beach Leased Housing Development III, LLC				
Document #:					
Order #:	10917678				
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:					
Apostille/Notarial Certification:	Country of Destination: Number of Certs:				
Filing:	Certified: Plain: COGS:				
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$ 155				

Thank you!

COVER LETTER

	gastration Section vision of Corporation	ns				
SUBJECT:		Housing Development III, I	.LC			
SUBJECT.	Name of Limited Liability Company					
The enclose Existence, a	d "Application by For nd theck are submitte	eign Limited Liability Comp d to register the above refer	nany for Authoriza enced foreign limi	ation to Tra ited liability	ansact Business i y company to tra	n Florida," Certificate of nsact business in Florida.
Please retun	n all correspondence o	concerning this matter to the	following:			
	Dan Bolles					
		N	ame of Person			
	Dominium					
		Fi	rm/Company			
	2905 Northwes	t Blvd, Stc. 150				
			Address			
	Plymouth, MN	55441				
		City/S	late and Zip Code			
	dan.bolles@Don					
		E-mail address: (to be used	for future annua	report not	tification)	
For further is	nformation concernin	g this matter, please call:				
Joh	in Nolde		612 at (604-64	00	
	Name o	f Contact Person	Area Code	Day	time Telephone	Number
Div Reg P.O	ision of Corporations distration Section Box 6327 lahassee, FL 32314			Division Registrate Clifton B 2661 Exe	of Corporations ion Section building secutive Center Core, FL 32301	ircle
	a check for the follow 125.00 Filing Fee	ing amount: S130,00 Filing Fee & Certificate of Status	■ \$155.00 Filit Certified Copy		□ \$160.00 Fit of Status & Co	ing Fee, Certificate rtified Copy

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

		TION 605.0902, FLORIDA STATUTES, THE SINESS INTHE STATE OF FLORIDA:	E FOLLOWING IN SUBMITTED TO REG	ISTERIA FOREKON LIMITED LIABITIT
		ousing Development III, LLC		
I.		Limited Liability Company; must include "Lin	nited Liability Company," "L.L.C.," or "LLC	(**)
(If	name unavailable, enter alternate n	ame adopted for the purpose of transacting business in	Horida. The alternate name must include "Limited	Liability Company," "L. I. C." or "LLC.")
2	Minnesota	hich foreign limited liability company is organized)	3(FELo	number, d'applicable)
	V	, , , ,		
4		(Date live transacted business in Florida if 0000	r to registration)	
		(Date first transacted business in Florida, if prior (See sections 605 0904 & 605 0905; F.S. to dete		1 20 E 1
5.	2905 Northwest Blvd,		6. 2905 Northwest Blvd, S	te. 150
	(Street Address of F Plymouth, MN 55441	тикіры Опяс)	Plymouth, MN 55441	1000円
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			75 9 1
				200
,	N1	ss of Florida registered agent: (P.O. B	ov NOT acceptable)	بن
1.	Name and street addres	_	1407 acceptable	65
	Name:	C T Corporation System	-	
	Office Address:	1200 South Pine Island Road		7*
	Office Address.	Discouries	33324	
		Plantation (Cst)	, Florida 33324 (Zip	code)
to i	comply with the provisi	ion, I hereby accept the appointment ons of all statutes relative to the prop s of my position as registered agent. By: (Registered agent (Registered agent))	per and complete performance of n	nct in this capacity. I further agree ny duties, and I am familiar with
		0		
8.	The name, title or capa Title or Capacity:	icity and address of the person(s) who Name and Address:	has/have authority to manage is/are <u>Title or Capacity:</u>	:: Name and Address:
	Co-President	Paul R. Sween	Vice President	Mark G. Sween
		2905 Northwest Blyd, Ste. Plymouth, MN 55441	156	2905 Northwest Blvd, Stc. 16 Pyrnouth, MN 55441
	Co-President	Armand E. Brachman	Senior Vice Pres.	Mark S. Moorhouse
	Co-rresident	2905 Northwest Blvd, Ste. Plymouth, MN 55441		2905 Northwest Blvd, Stc. ld Pymouth, MN 55441
(U	se attachments if necess	sary)		
		of existence, no more than 90 days old	d. duly authenticated by the official	having custody of records in the
w	isdiction under the law of the translator must be su	of which it is organized. (If the certific	cate is in a foreign language, a trans	lation of the certificate under oath
10. sub	This document is execumitted in a document to	ated in accordance with section 605.02 the Department of State constitutes a	203 (1) (b), Florida Statutes. I am av third degree felony as provided for	vare that any false information in s.817.155, F.S.
		11/1/2/2011		
		Signat	ture of an authorized person	
		Mark G. Sween		
			d or printed name of signee	

Office of the Minnesota Secretary of State Certificate of Good Standing

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name:

Vero Beach Leased Housing Development

III, LLC

Date Filed:

04/05/2018

File Number:

1010976300021

Minnesota Statutes, Chapter:

322C

Home Jurisdiction:

Minnesota

This certificate has been issued on:

04/09/2018



Oteve Pinnon Steve Simon

Secretary of State State of Minnesota