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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	#)
		MAIL
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(Dc	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SEP 2 2 2019

T SCHROEDEE

· · · ·	
TO: Registration Section Division of Corporations	COVER LETTER
ZP Somerset Oak Housing	Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida." Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

.

of Status & Certified Copy

Please return all correspondence concerning this matter to the following:

•

Rachele Huett		
	Name of Person	
Wilhoit Properties		
	Firm/Company	
1329 E. Lark Street		
	Address	
Springfield, MO 65804		
Ci	ity/State and Zip Code	
rhuett(a, wilhoitproperties.com		
E-mail address: (to be	used for future annual	report notification)
urther information concerning this matter, please call	:	
Rachele Huett	417	885-3509
Name of Contact Person	at (Area Code	Daytime Telephone Number
MAILING ADDRESS:		STREET ADDRESS:
Division of Corporations		Division of Corporations
Registration Section		Registration Section
P.O. Box 6327		Clifton Building
Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301
losed is a check for the following amount:		
🔲 🗄 \$125.00 Filing Fee 👘 🗍 \$130.00 Filing Fee	& 👘 🗖 \$155.00 Filin	g Fee & 👘 🗖 \$160.00 Filing Fee, Certi

Certified Copy

Certificate of Status

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

IN COMPLIANCE WITH SECTION 605 0402, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN-LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

L ZP Somerset Oak Housing, LLC

(Name of Foreign Lamited Lability Company; must include "Limited Lability Company," "L.L.C.," or "LLC.")

- Missouri	ame adopted for the purpose of transacting husiness in H	3.		• • •	
(Jurisdiction under the law of w	bich foreign lamited liability company is organized)	-'	(FFI number, if	upplicable)	
1					
•••	(Data first trateacted business in Honda, if prior to (See sections 605,0904 & 605,0905, E.S. to determ	o registration) nine penalty ha	bibity()		
5 1329 E. Lark Street		• •	329 E. Lark Street	N110	
Sweet Address of I	inneipal Office)	0	(Mailing Address)		-11
Springfield, MO 6580-	•	S	pringfield, MO 65804	<u></u>	1 1
		_	dunighting aport		1
_		-			[]
Name and <u>street addres</u>	is of Florida registered agent: (P.O. Bo:	x <u>NQT</u> ac	ceptable)	PH12:	.
Name:	Corporation Service Company	····· <u>·</u> ,			
Office Address:	1201 Hays Street				
	Tallahassee		, Florida <u>32301</u>	4: j¥	
	(City)		(Zip coste)	-	
Registered agent's accep					
	gistered agent and to accept service of				
	tion, I hereby accept the appointment a				
	ons of all statutes relative to the prope s of my position as registered agent.	r unu com		es, unu i ani juminur wi	m
ана ассера не откушон.	by my position us registered agent.		Holly Jones		
	MOKLUINNIN	A	ssistant Vice President		
	IRegistered agent's	(signature)			
8. The name, title or capa	icity and address of the person(s) who h	as/have au	thority to manage is/are:		
Title or Capacity:	Name and Address:			ame and <u>Address:</u>	

Membur____

ind Address;	Title or Capacity:	<u>Same and Address:</u>
M. Zimmerman - hart st. gfield, we lose of		······································

(Use attachments if necessary)

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware 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.

_(4)(1	
0	Signature of an authorized person	_
Justin M. Zimmerman		

Typed or printed name of signer

STATE OF MISSOURI



John R. Ashcroft Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, JOHN R. ASHCROFT, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

ZP Somerset Oak Housing, LLC LC001608777

was created under the laws of this State on the 11th day of September, 2018, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF. I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 13th day of September, 2018.

cretary



