## M1900000971

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





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## COVER LETTER

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TO:	Registration Division of C						
SUBJE		1031, LLC					
Name of Limited Liability Company							
						ness in Florida," Certificate of to transact business in Florida.	
Please r	eturn all corres	pondence conc	erning this matter to the foll-	owing:			
	Jam	es Woodley					
	Name of Person						
	Investment Property Exchange Services, Inc.						
	Firm/Company						
	2425 E Camelback Rd Ste 200						
	Address						
	Phoenix, AZ 85016						
	City/State and Zip Code						
	james.woodley@ipx1031.com						
	E-mail address: (to be used for future annual report notification)						
For furt	her information	concerning thi	s matter, please call:				
	James Wood	ley	a	602 t (	850-8627		
Name of Contact				Area Code	Daytime Telep	hone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, Ft. 32314				STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, F1, 32301			
			ollowing amount: b: FLORIDA DEPARTME	ENT OF STA	re		
	\$125.00	_	\$130.00 Filing Fee & Certificate of Status	\$155.00	Filing 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: HHR SB 1031, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.") Delaware (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted hisiness in Florida, if prior to registration.) (See sections 605 0904 & 605 0905, F.S. to determine penalty liability) 2425 E Camelback Rd #200, Phoenix, AZ 85016 2425 E Camelback Rd #200, Phoenix, AZ 85016 (Mailing Address) (Street Address of Principal Office) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee . Florida

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's tignature)

(City)

Karin L. Dunn, Assistant VP

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) total): Title or Capacity: Name and Address: Title or Capacity; Name and Address; Name: Annette Reed National Safe Harbor Exchanges, Inc. ☐ Manager Name: Manager 2425 E Camelback Rd Ste 200 2425 E Camelback Rd Ste 200 ■ Member Address: Member Address: Phoenix, AZ 85016 Phoenix, AZ 85016 ■Authorized Authorized Person Person Other Other Other Other\_\_\_\_ Machelle Click Manager Name: Manager | Name: Address: \_\_\_\_\_2425 E Camelback Rd Ste 200 Member Member Address: Phoenix, AZ 85016 Authorized Authorized Person Person Other\_\_\_\_ Other\_\_\_\_ Other\_ Other\_ Name: Manager Manager Manager Name: Address: \_\_\_\_\_\_ Member Member Address: Authorized Authorized Person Person Other\_\_\_\_ Other Other\_ Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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.\$17.155, F.S.

Typed or printed name of signee

Machelle Click, AVP of Sole Member

Page 1



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

DELAWARE, DO HEREBY CERTIFY "HHR SB 1031, 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 FOURTEENTH DAY OF JANUARY, A.D. 2019.



Authentication: 202077097

Date: 01-14-19