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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195			
REFERENCE : 639601 438147			
AUTHORIZATION : Sprels elevado	点 句。	2019	٠-,٠
COST LIMIT : \$125.00		2019 FE3 4	
ORDER DATE : February 20, 2019  ORDER TIME : 2:29 PM	1 1: 0:4	9# t ∨ 0	֧֧֧֧֧֧֚֓֞֝֟֝֟֝֟֝֟֝֟ ֖֖֖֖֓֞֞
ORDER NO. : 639601-010	.,	G,	
CUSTOMER NO: 4381472			
FOREIGN FILINGS  NAME: LUDLAM TRAIL PHASE II, LLC			
XXXX QUALIFICATION (TYPE: <u>LL</u> )			
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:			
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING			
CONTACT PERSON: Emily Croft EXT# 62925			

EXAMINER:

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

IN COMPLANCE WITH SECTION (05/0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign	Einnied Liability Company, must include "Limit	ed Liability Con	apany," "E. I. C.," or "LI.(')			_	
finame unavuilable, enter alternate n	ame adopted for the purpose of transacting business in Fl	onda. The alternati	e name must include "I imited Liability	Company,""L	ن م رکہا۔	,ı.c	
Delaware				3.5	<u> </u>		
		3.			<del>-11</del> 1		
Durisdiction under the law of w	high foreign limited hability company is organized)		(TE) muober, i	(applicable)	ස		
				•	$\sim$		
				, .	$\supset$		
	(Date first transacted business in Florida, if prior to			······································	$\Rightarrow$		
	(See sections 605 0901 & 605 0905, F.S. to determ	i ragistration ( una penalty habilit	<u>)</u> 1	, <del>~</del> ~,			
2001 Commit Body F	Neisson	200	M. Committee Deady Debug	ζ,	لب		
2001 Summit Park D			11 Summit Park Drive	;	#		
(Street Address of F	rincipal Office)	0	(Mailing Address)		œ_	_	
Suite 300		Sui	te 300				
Orlando, Florida 32810		Orlando, Florida 32810					
Name and street address	ss of Florida registered agent: (P.O. Bo	N <u>OT</u> accep	nable)				
Name:	Corporation Service Company	<u> </u>	_				
Office Address:	1201 Hays Street						
	Tallahassee		32301 , Florida				
	(Cin.)	<del></del>	(Ap code)				

## 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.

Corporation Service Company
By:

Asst. Vice President

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: Samuel C. Stephens, III Manager | Manager Name: \_\_\_\_\_ 2001 Summit Park Drive Address: Member Member | Suite 300 ■ Authorized Authorized Orlando, Florida 32810. Person Person Other \_\_\_\_\_ Other Other Manager Manager Name; \_\_\_\_\_\_ Name: Address: Member .... ☐ Member Address: \_\_\_ Authorized Authorized Person Person Other\_\_\_\_ Other Other\_\_\_ Other\_\_\_\_ Manager Manager Name: \_ Name: \_\_\_\_\_ Member Address: ☐ 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 645.0203 (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 \$.817.155, F.S. Signature within authorized person-Samuel C. Stephens, III

Typed or printed name of signee

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "LUDLAM TRAIL PHASE II, 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 TWENTIETH DAY OF FEBRUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LUDLAM TRAIL

PHASE II, LLC" WAS FORMED ON THE TWENTIETH DAY OF FEBRUARY, A.D.

2019.

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

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Authentication: 202292871

Date: 02-20-19