

2/27/2019

Division of Corporations

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Florida Department of State
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**Foreign Limited Liability Company
MANDARIN APARTMENTS I, LLC**

Certificate of Status	0
Certified Copy	1
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Electronic Filing Menu

Corporate Filing Menu

Help

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

*IN COMPLIANCE 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:*

1. Mandarin Apartments I, 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.")

2. Delaware Applied for
(Jurisdiction under the law of which foreign limited liability company is organized) 3. _____
(FEI number, if applicable)

4. February 22, 2019
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

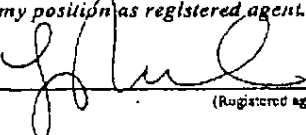
5. c/o 101 E. Kennedy Boulevard, Suite 3700 6. c/o Kimball Key, LLC
(Street Address of Principal Office) (Mailing Address)
Tampa, FL 33602 P.O. Box 21051
Tampa, FL 33622-1051

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Jerilyn H. Reed
Office Address: 101 E. Kennedy Boulevard, Suite 3700
Tampa 33602
(City) , Florida (Zip 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.


(Registered agent's signature)

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((H19000067165 3)))

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:**
☒ Manager: Name: David K. Greider
☐ Member: Address: c/o Kimball Key, LLC
☐ Authorized: P.O. Box 21051
Person: Tampa, FL 33622-1051
☐ Other: ☐ Other:

☐ Manager: Name: _____
☐ Member: Address: _____
☐ Authorized: _____
Person: _____
☐ Other: ☐ Other:

☐ Manager: Name: _____
☐ Member: Address: _____
☐ Authorized: _____
Person: _____
☐ Other: ☐ Other:

Title or Capacity: **Name and Address:**
☐ Manager: Name: Bryan Dairy Place Apartments, LLC
☒ Member: Address: c/o Kimball Key, LLC
☐ Authorized: P.O. Box 21051
Person: Tampa, FL 33622-1051
☐ Other: ☐ Other:

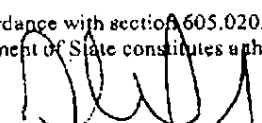
☐ Manager: Name: _____
☐ Member: Address: _____
☐ Authorized: _____
Person: _____
☐ Other: ☐ Other:

☐ Manager: Name: _____
☐ Member: Address: _____
☐ Authorized: _____
Person: _____
☐ Other: ☐ Other:

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed 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.817.155, P.S.



Signature of an authorized person
David K. Greider, Manager

Typed or printed name of signer

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((H19000067165 3)))

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MANDARIN APARTMENTS I, 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 TWENTY-FIFTH DAY OF FEBRUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MANDARIN APARTMENTS I, LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF FEBRUARY, A.D. 2019.

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



7292866 8300

SR# 20191358185

You may verify this certificate online at corp.delaware.gov/authver.shtml

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A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202320104

Date: 02-25-19