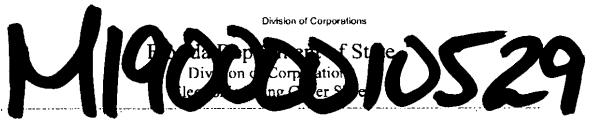
10/31/2019



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000322547 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

т	~	٠	
	u		

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (514)280-3338 Fax Number : (954)208-0845

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

Foreign Limited Liability Company Fairway REO Center Owner, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

T GLASS

NOV 0 1 2019

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

			0002, PECNULA STATOTES, THE NTHE STATE OF FLORIDA:	, EQULUINENS.	is seixui ilis (O Mesis)	ER A FOREIGN LIMITED LIABIL
1. F	airway REO Center C)wner, L	LC			
	(Name of Foreign	Limited L	ability Company; must include "Lin	uted Liability Co	mpany." "L.L.C.," or "LLC ")	
)1 m	compositable ones at our	camer in book in	for the purpose of transacting business in	Florida The shorter	tle name most melode "Limited Lish	offity Congrans " "L.L.C." of "LLC.")
	claware	tasic scarpico	the the purpose of thereating customs in	7		
?. <u></u>	(Jurisdiction under the law of w	tuch tureign	limited liability company is organized)		(FE) mumb	er, it applicable)
4		(i)ate	first intespreted husiness to Florida, if prior	r to registration.)	Y-11	
		(500	ections 605,0904 & 605 0905, F.S. to dete			
5 _	(Sirect Address of	Fincipal Oil	ice)	6	(Moliny Add	rol
	800 N. Magnolia Aver	nie, Suite	: 1625			<u> </u>
(Orlando, FL 32803		<u> </u>	*****		
7. 1	Name and <u>street addre</u>	<u>ss</u> of Flor	ida registered agent: (P.O. B	ox <u>NOT</u> acc	aptable)	
	Name:	CTC	orporation System			
						
	Office Address:	1200	South Pine Island Road	.		
		Plants			, Florida <u>33324</u> (Zipada	
	gistered agent's accep		(City)		(Zip cide	20
• • • • • •		By:	nosition as registered agent. CT Corporation System		Kimberly Lau	ghrey, Asst. Sec.
			(Repistered ages	of's signature)		
8.	The name, title or cap	acity and	address of the person(s) who	has/have aut	hority to manage is/are	· &
	Title or Capacity:	•	Name and Address:	Title	or Capacity:	Name and Address:
	Manager		PG-PKY Fairway JV, LEC			
		_	800 N. Magnolia Ave. #16	25		
			Orlando, FL 32803			<u></u>
		_				
						
(U	se attachments if nece	ssary)				
9. A	trached is a certificate	e of exist	ence, no more than 90 days o	ld, duly authe	nticated by the official ha	ving custody of records in the
juri	sdiction under the law he translator must be s	of which	rit is organized. (If the certifi	cate is in a fo	reign language, a translat	ion of the certificate under oa
10, sub	This document is executived in a document t	cuted in i to the De	accordance with section 605.0 partment of State constitutes a	203 (1) (b), F third degree	lorida Statutes. I am awar felony as provided for in	e that any talse information \$,817,155, F.S.
			A. Nov.i Stolmes la			
		-		store of an authorize	d person	<u></u>
		A. No	ni Holmes-Kidd			
			T's The	ed or painted name of	al saumee	



Page 1

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

DELAWARE, DO HEREBY CERTIFY "FAIRWAY REO CENTER OWNER, 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-EIGHTH DAY OF OCTOBER, A.D. 2019.

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

2019 CCT 31 PM 3: 44



Authentication: 203882536

Date: 10-28-19

7649374 8300 SR# 20197772334

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