

M210000009687

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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JUL 29 2021
M. SOLOMON

STANLEY MARTIN

HOMES

July 6, 2021

Florida Department of State
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

To Whom it May Concern:

We inadvertently submitted an application to form a new entity in the State of Florida named Stanley Martin Homes, LLC (L21000305420) on July 2, 2021, and subsequently dissolved that entity in the State of Florida on July 6, 2021. We have no intention of using this name again to form a new entity in the State of Florida.

Further, in correction, attached please find our Application by a Foreign Limited Liability Company for Authorization to Transact Business in Florida for Stanley Martin Homes, LLC along with our check in the amount of \$125.

Please contact me if you have any questions.

Sincerely,

DocuSigned by:



980401531DF641F

Bradley Lefkowitz

Associate General Counsel

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CLERK OF STATE
TALLAHASSEE, FL 32303

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Stanley Martin Homes, LLC

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.

Please return all correspondence concerning this matter to the following:

Marla DeCriscio

Name of Person

Stanley Martin Homes, LLC

Firm/Company

11710 Plaza America Drive, Suite 1100

Address

Reston, VA 20190

City/State and Zip Code

legal@stanleymartin.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brad Lefkowitz

703

964-5173

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

**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. Stanley Martin Homes, 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 3. 20-8046523
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 11710 Plaza America Drive, Suite 1100 6. 11710 Plaza America Drive, Suite 1100
(Street Address of Principal Office) (Mailing Address)
Reston, VA 20190 Reston, VA 20190

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

Name: C T Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

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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.

Denise Bell
(Registered agent's signature)

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: Steven B. Alloy

☐ Member Address: 11710 Plaza America Drive

☐ Authorized Suite 1100

Person Reston, VA 20190

☐ Other ☐ Other

☒ Manager Name: Joel S. Reed

☐ Member Address: 11710 Plaza America Drive

☐ Authorized Suite 1100

Person Reston, VA 20190

☐ Other ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other ☐ Other

Title or Capacity: **Name and Address:**

☒ Manager Name: Randy L. Kotler

☐ Member Address: 11710 Plaza America Drive

☐ Authorized Suite 1100

Person Reston, VA 20190

☐ 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, F.S.

DocuSigned by:

Brad Lefkowitz

980401531DF641F

Signature of an authorized person

Bradley Lefkowitz

Typed or printed name of signer

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CLERK OF SUPERIOR COURT
JUL 23 2021


Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "STANLEY MARTIN HOMES, 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-THIRD DAY OF JULY, A.D. 2021.

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



Jeffrey W. Bullock, Secretary of State

4779369 8300

SR# 20212782433

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

Authentication: 203745638

Date: 07-23-21



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 15, 2021

MARLA DECRISCIO
STANLEY MARTIN HOMES, LLC
11710 PLAZA AMERICA DRIVE, SUITE 1100
RESTON, VA 20190

SUBJECT: STANLEY MARTIN HOMES, LLC
Ref. Number: W21000100922

We have received your document for STANLEY MARTIN HOMES, LLC and check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon
Senior Section Administrator

Letter Number: 621A00016316