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Page: 2 of 5

Division of Corporations

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Foreign Limited Liability Company TDC DELTONA LAND, L.L.C.

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S. ROBERTS

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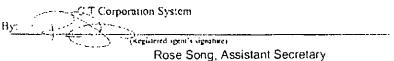
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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:

(Name of Foreign	Limited Liability Company; must include "Limited	Liability Company," "L.E.C.," or "LLC."				
name unavailable, enter alternate i	name adopted for the purpose of transacting business in Fig.	nda. The alternate name must include "Limited f	sability Company," "L.I. C," or "Cl C			
Delaware		88-3345784				
(Juesdetion under the taw of which foreign limited linb lity company is organized)		3. (FEI number, if applicable)				
upon qualification						
	(Date first transacted business in Florida, if prior to a (See sections 605 0904 & 605 0908, F.S. to determine	cgistration) in penalty liability)	<u> </u>			
1900 West Loop South		1900 West Loop South				
cet Address of Principal Office)		6, (Mailing Address)				
Suite 1300		Suite 1300				
Houston, TX 77027		Houston, TX 77027				
	s of Florida registered agent: (P.O. Box	NOT acceptable)	2022 AUG 15			
Name:	C T Corporation System	······	5 PH			
Office Address:	1200 South Pine Island Road					
	Plantation	. Florida				
	(City)	(Zip voče)				

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.



Page: 4 of 5

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:
Manager	Name: Transwestern Development Compa	any	□Manager	Name:	
∐Member	Address: 1900 West Loop South		□Member	Address:	
□Authorized	Suite 1300		☐ Authorized		
Person	Chicago, 1L 60606		Person		
Other	Other		□Other		□Other
□Manager	Name:		□Manager	Name:	
□Member	Address:		□Member*	Address:	
□Authorized			□Authorized		
Person			Person	,	
□Other	□Other		Other		○Other
□ Manager	Name:		□Manager	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. 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.

Cristine Corrado, Authorized Person



Page 1

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

DELAWARE, DO HEREBY CERTIFY "TDC DELTONA LAND, L.L.C." 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 TWELFTH DAY OF AUGUST, A.D. 2022.

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

at corp.delaware.gov/auth

Authentication: 204153704

Date: 08-12-22