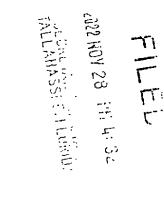
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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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### CT CORP

#### 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

D	ate:	11/28/2022	711
		Acc#I20160000072	a: DW
Name:	Quiet Oaks I	MHP LLC	
Document #:			
Order #:	14651022		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
Filing: 🗸	Certified: Plain: COGS:		
Availability  Document  Examiner  Updater  Verifier  W.P. Verifier  Ref#	Amount: \$	155.00	

Thank you!

#### COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJEC	Quiet Oaks MHP LLC					
Name of Limited Liability Company						
		y Company for Authorization to Transact Business in Florida," Certificate of e referenced foreign limited liability company to transact business in Florida.				
Please re	turn all correspondence concerning this matter	to the following:				
	Marc Edwards					
		Name of Person				
	Homes Of America MHP LLC					
	Firm/Company					
	10151 Deerwood Park Blvd.					
		Address				
	Jacksonville, FL 32256					
	City/State and Zip Code					
	MHP@ourhomesofamerica.com					
	E-mail address: (to	be used for future annual report notification)				
For furth	er information concerning this matter, please c	ail:				
	Marc Edwards	704 8624199				
	Name of Contact Person	at () Area Code Daytime Telephone Number				
	Mailing Address: Registration Section	Street Address: Registration Section				
Division of Corporations		Division of Corporations				
P.O. Box 6327		The Centre of Tallahassee				
•	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DE  \$125.00 Filing Fee \$130.00 Filing F  Certificate	ee & 🔲 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee, Certificate				

A second of the second

## 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 IJABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unavailable, enter alternate	name adopted for the purpose of transacting business in Flo	maa incate	There have have believe thatter theology	/ Company, LLC, or
Delaware		3.	(FEI number, if i	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)		(FEI number, if	applicable)
	(Date first transacted business in Florida, if prior to r (See sections 605,0904 & 605,0905, F.S. to determine	egistration ) re penalty liab	witry)	_
10151 Deerwood Park	Blvd.	P( 6.	O Box 483	
et Address of Principal Office)	<del></del>	V	(Mailing Address)	
Jacksonville, FL 32256	; <del></del>	Во	ergenfield, NJ 07621-9998	
		_		
Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acc	eptable)	יאררי הארריי מרקיי
Name and street addres	C T Corporation System	NOT acc	reptable)	JZZ NOT 20
		NOT acc	reptable) 	JZZ ROT ZO TE

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.

By: Clean Holloway, Asst. Secretary
(Registered agent's signature)

8. For initial index manage [up to six (		nd addresses of the primary	members/managers or persons authorized to
Title or Capacity:	Name and Address:	Title or Capacit	Name and Address:
■Manager	Name:	□Маладег	Name:
□Member	Address:	□Member	Address:
□Authorized	Jacksonville FL 32256	□Authorized	
Person		Person	
Other	Other	Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	28 5
Person		Person	<u> </u>
□Other	Other	Other	□Other ○S · · ·
□Manager	Name:	□Manager	Name:
□Mcmber	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	Other	Other	Other
indexed individuals  9. Attached is a certifurisdiction under the translator mus  10. This document i	s executed in accordance with section 605.0 nent to the Department of State constitutes a	Florida Department of Stands, duly authenticated by the cate is in a foreign language (203 (1) (b), Florida Statute	te Annual Report form.  e official having custody of records in the e, a translation of the certificate under oath s. I am aware that any false information
	Marc Edwards		

Typed or printed name of signee

# <u>Delaware</u>

The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "QUIET OAKS MHP 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 NOVEMBER, A.D. 2022.

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

FILEL WISSELFT CORN



Jeffrey W. Bullinch, Secretary of State