

M25000003717

(Requestor's Name)

(Address)

(Address)

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☐ PICK-UP

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

25 MAR 13 PM 2:09

MS



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations
From: Amanda Miller
Ext: x62969
Date: 03/13/25
Order #: 1869984-1
Re: Ch Mf Bth Iii/Fort Lauderdale Preserve, L.L.C.
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority
Amount to be deducted from our State Account: \$125.00 - FL State Account Number:
120000000195
Certificate of Good Standing from State of Incorporation

A handwritten signature in black ink, appearing to read "Amanda Miller", is written over the text of the enclosed items.

Please take the following action:
File in your office on basis
Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CH MF BTH III/Fort Lauderdale Preserve, L.L.C.
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:

Denise Cottle

Name of Person

Crow Holdings

Firm/Company

3819 Maple Avenue

Address

Dallas, TX 75219

City/State and Zip Code

dcottle@crowholdings.com

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

For further information concerning this matter, please call:

Denise Cottle

214

661-8000

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. CH MF BTH III/Fort Lauderdale Preserve, L.L.C.
(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
(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0903, F.S. to determine penalty liability)

5. 3819 Maple Avenue
(Street Address of Principal Office)

6. 3819 Maple Avenue
(Mailing Address)

Dallas, TX 75219

Dallas, TX 75219

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

Name: Corporation Service Company

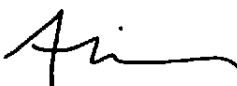
Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(City) (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.

Corporation Service Company

By: 
(Registered agent's signature)

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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: SCH 139 Ft. Lauderdale Preserve, L.P.
☐ Member Address: 3819 Maple Avenue
☐ Authorized Dallas, TX 75219
Person _____
☐ Other _____ ☐ Other _____

☐ Manager Name: Nadia Beagles
☐ Member Address: 3819 Maple Avenue
☒ Authorized Dallas, TX 75219
Person _____
☐ Other _____ ☐ Other _____

☐ Manager Name: Trevin Chae Studebaker
☐ Member Address: 3819 Maple Avenue
☒ Authorized Dallas, TX 75219
Person _____
☐ Other _____ ☐ Other _____

Title or Capacity: **Name and Address:**
☐ Manager Name: Sean Rae
☐ Member Address: 38919 Maple Avenue
☒ Authorized Dallas, TX 75219
Person _____
☐ Other _____ ☐ Other _____

☐ Manager Name: Donna Kruger
☐ Member Address: 3715 Northside Pkwy. Bldg 200
☒ Authorized Atlanta, GA 30327
Person _____
☐ Other _____ ☐ Other _____

☐ Manager Name: James Berardinelli
☐ Member Address: 3715 Northside Pkwy. Bldg 200
☒ Authorized Atlanta, GA 30327
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.



Signature of an authorized person

Nadia Beagles, VP of Residential LTH GP, L.L.C., the General Partner of SCH 139 Ft. Lauderdale Preserve, L.P.

Typed or printed name of signer

Delaware

The First State

Page 1

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CH MF BTH III/FORT LAUDERDALE PRESERVE, 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 THIRTEENTH DAY OF MARCH, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CH MF BTH III/FORT LAUDERDALE PRESERVE, L.L.C." WAS FORMED ON THE TWELFTH DAY OF MARCH, A.D. 2025.

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



C. P. Sanchez

Charuni Patibanda-Sanchez, Secretary of State

Authentication: 203160320

Date: 03-13-25

10128895 8300

SR# 20251049517

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