MBDDD	20471
(Requestor's Name) (Address) (Address)	400267688834
(City/State/Zip/Phone #)	FILED DEPARTMENT OF STATE 15 JAN 16 PH 3 IDEJAN 16 PH 4: 39 SECRETARY OF STATE TALLAHASSEE, FLORIDA
Office Use Only	JAN 20 2015 S. YOUNG

·

:

•

•

FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

ū

Z

6

밀 구 구

ယ္ပ

ΕD

DATE: 1/16/15

÷

NAME: ALVAR FL LLC

TYPE OF FILING: APPLICATION

COST: 125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION:

ABBIE/PAU

. . I

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

A Call .

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 ALVAR FL 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

(Jurisdiction under the law of which foreign limited liability company is organized)

(FEI number, if applicable)

A December 30, 2014

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

5. Mutual House, 70 Conduit Street, London, W1S 2GF, United Kingdom

(Street Address of Principal Office)

_{6.} c/o Intertrust Corporate Services Ltd.

200 Bellevue Parkway, Suite 210, Wilmington, DE 19809

(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Tamina Homes, Inc., sole member

200 Bellevue Parkway, Suite 210, Wilmington, DE 19809

8. Attached is an original 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. (A photocopy is not acceptable: If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Signature of an authorized person জ (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penaltics of perjury that the facts subce herein are true. 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 a. STA SFAF.S. 69 adan d, 5 Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

ALVAR FL LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Florida Filing & Search Services Inc.

(Name)

155 Office Plaza Dr, Suite A

\$ 25.00

\$ 30.00

5.00

S

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Tallahassee

FL 32301 City/State/Zip

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida ≥řn ਯ Statutes.

ROHA	PETAF LAHAS	JAN
(Signature)	SET	ດ
	EFFL FL	P
\$ 100.00 Filing Fee for Application		ယ္န

Designation of Registered Agent

Certificate of Status (optional)

Certified Copy (optional)

m



PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ALVAR FL 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 SIXTEENTH DAY OF JANUARY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ALVAR FL LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF NOVEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

 \geq 5 굴 ယ္ ŝ



5646738 8300

150059741 You may verify this certificate online at corp.delaware.gov/authver.shtml