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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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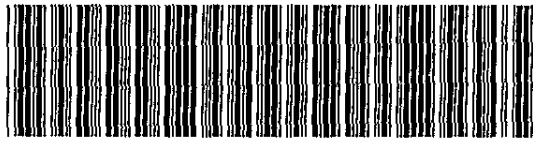
(Business Entity Name)

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TALLAHASSEE, FLORIDA

150

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STUART LAND & TIMBER, 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:

E. C. STUART, JR.
(Name of Person)

STUART LAND & TIMBER, L.L.C.
(Firm/Company)

P.O. BOX 550
(Address)

PICAYUNE, MISSISSIPPI 39466
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

E. C. STUART, JR. at (904) 880-1499
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

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

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. STUART LAND & TIMBER, L.L.C.
(Name of Foreign Limited Liability Company)
2. STATE OF MISSISSIPPI 3. N/A
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. 9-28-04 5. PERPETUAL
(Date of Organization) (Duration: Year limited liability company will exist or "perpetual")
6. N/A
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 115 WILLIAMS AVENUE SUITE B
PICAYUNE, MS. 39466
(Street Address of Principal Office)

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8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
- | | |
|----------------------------|------------------------------|
| <u>E. C. STUART, JR.</u> | <u>DEBORAH JABOUR STUART</u> |
| <u>P.O. BOX 550</u> | <u>P.O. BOX 550</u> |
| <u>PICAYUNE, MS. 39466</u> | <u>PICAYUNE, MS. 39466</u> |

10. 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.)

11. Nature of business or purposes to be conducted or promoted in Florida: Real Estate

E. C. Stuart, Jr.
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
E. C. Stuart, Jr.
Typed or printed name of signee

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, 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:

STUART LAND & TIMBER, L.L.C.

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

CHIP CRABTREE

(Name)

8702 PERIMETER PARK BLVD.

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

JACKSONVILLE

FL

32216

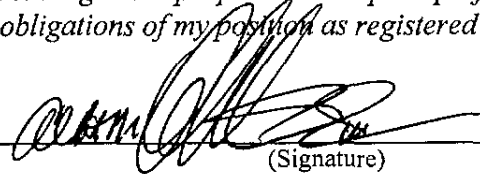
City/State/Zip

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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 608, Florida Statutes.


(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

State of Mississippi

Office of the Secretary of State
Eric Clark, Secretary of State
Jackson, Mississippi

CERTIFICATE

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such the legal custodian of the records as required by The Mississippi Limited Liability Company Act to be filed in my office do hereby certify that:

STUART LAND & TIMBER, L.L.C.

Formed September 28, 1998

A Mississippi Limited Liability Company has filed the necessary documents in this office and has obtained a certificate of formation under the provisions of The Mississippi Limited Liability Company Act as shown by the records in this office.

That the registered office of said Limited Liability Company is located at:

115 WILLIAMS AVE #B, PO BOX 550
PICAYUNE MS 39466

and that the registered agent at that address is:

E C STUART JR

I further certify that said Limited Liability Company has paid the fees for filing the above papers required by law as shown by the records of this office and that said Limited Liability Company is in good standing to do business in Mississippi at this time.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Given under my hand
and seal of office
November 12, 2004

Eric Clark

ERIC CLARK
Secretary of State