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SECRETARY OF STATE

### JOSEPH A. TROIANO, ESQ., PA

A PROFESSIONAL ASSOCIATION

MAILING ADDRESS:

15880 SUMMERLIN, SUITE # 300 PMB # 316 FORT MYERS, FL 33908 239.482.3998 DIRECT 239.823.5222 CELL PHONE 239.466.2866 FAX jat621@comcast.net

August 30, 2005

PRIVATE AND CONFIDENTIAL

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

RE: JLMA ASSET VENTURES, LLC

Dear Sir or Madam:

Enclosed for filing pursuant to your letter dated August 22, 2005 (copy enclosed) please find an Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida submitted on behalf of our Client, JLMA Ventures, LLC, an Alaska Limited Liability Company that is the General Partner of JLMA Asset Management Limited Partnership. Also enclosed is our check in the amount of \$135.00 for the required filing fee, Registered Agent Designation and Certificate of Status.

Please return the Certificate of Status to this office in the postage paid return envelope that we have provided.

Thank you for your assistance. Should you have any questions or require Additional information, please feel free to contact me. Thank you for your assistance.

oseph A. Troiano, Eso

For the Firm

JAT/bsb Enclosures

#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations					
SUBJECT: JLMA VENTURES, LLC					
(Name of Limited Liab	ility Company)				
The enclosed "Application by Foreign Limited Liability Co Florida," Certificate of Existence, and check are submitted liability company to transact business in Florida					
Please return all correspondence concerning this matter to t	he following:				
JOSEPH A. TROIANO, ESQ.					
(Name of Pe	rson)				
JOSEPH A. TROIANO, ESQ., PA					
(Firm/Comp	any)				
15880 SUMMERLIN, SUITE 300; PMB #316					
(Address)					
FORT MYERS, FL 33908					
(City/State and 2	lip Code)				
For further information concerning this matter, please call:					
JOSEPH A. TROIANO, ESQ. at ( 2	39 \ 482-3998				
	ea Code & Daytime Telephone Number)				
STREET ADDRESS:	MAILING ADDRESS:				
Registration Section	Registration Section				
Division of Corporations	Division of Corporations				
409 E. Gaines Street	P.O. Box 6327				
Tallahassee, Florida 32399	Tallahassee, Florida 32314				
- 444					
Enclosed is a check for the following amount:					
☐ \$125.00 Filing Fee	5.00 Filing Fee & \$\Boxed{\sigma}\$\$\$\$\$\$\$\$\$160.00 Filing Fee, Certificate \text{Octified Copy}\$				

## 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:

I. JEMA	(Name of Foreign Limited I	r ia	Eller Commons		
	(Name of Foreign Limited 1	Lla	onity Company)		
2. ALASI	KA	3.	20-0444745		
	liction under the law of which foreign limited liability ny is organized)		(FEI number, if applicable	2)	
4. 01/20	0/04	5.	DECEMBER 31, 2113		
	(Date of Organization)		(Duration: Year limited liability compaexist or "perpetual")	ny will cea	ise to
6. SEP	TEMBER 1, 2005				
	(Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.				
7. <u>801 V</u>	WEST 10TH STREET, SUITE 300			<u>.</u>	
JUNE	EAU, AK 99801				
<u> </u>	(Street Address	of	Principal Office)		
8. If lin	nited liability company is a manager-managed	l co	ompany, check here 🔽	2005 SECR	77
9. The	name and usual business addresses of the man	ıag	S	<b>á</b> –	
JOS	SEPH A. TROIANO and JOSEF R. STRAUSS			<del>Ω</del> ₩	
1280	00 UNIVERSITY PARK, SUITE 670		FLOR	FST.	
FOR	RT MYERS, FL 33907		₩ 	2	
the jurisdi	thed is an original certificate of existence, no more than 90 of iction under the law of which it is organized. (A photocopy nof the certificate under oath of the translator must be subr	y i	s not acceptable. If the certificate is in a fore		
11. Nat	ture of business or purposes to he conducted or	rp	romoted in Florida: GENERAL PA	RTNER C	)F
JLMA	A ASSET MANAGEMENT LIMITED PARTNERSHI	ΙP			
	Ham				<del></del>
	Signature of a member or an au	ıth	orized representative of a member.		
		F.S.	, the execution of this document constitutes		
	JOSEPH A. TROIANO, MANAGE	R			
	Typed or printed	d n	ame 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:	
JLMA VENTURES, LLC	<del></del>
2. The name and the Florida street address of the registered agent and office are:	•
JOSEPH A. TROIANO, ESQ.	
(Name)	
12800 UNIVERSITY PARK, SUITE 670	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
FORT MYERS FL 33907  City/State/Zip	
Having been named as registered agent and to accept service of process for the above staliability company at the place designated in this certificate, I hereby accept the appointing agent and agree to act in this capacity. I further agree to comply with the provisions of relating to the proper and complete performance of my duties, and I am familiar with attaching a provided for in Chapter 608, Florida Stalian (Signature)	lehi as registered Alstalines

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

Alaska Entity # 82723D

# State of Alaska Department of Commerce, Community, and Economic Development

# CERTIFICATE OF GOOD STANDING

THE UNDERSIGNED, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby certifies that

#### JLMA VENTURES, LLC

on the 20th day of January, 2004 filed in this office its Articles of Organization for a Limited Liability Company organized under the laws of this state.

I FURTHER CERTIFY that said Limited Liability Company is in good standing, having fully complied with all the requirements of this office.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute this certificate and affix the Great Seal of the State of Alaska on the 16th day of August, 2005.

Julia cree

William C. Noll Commissioner