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(R	Requestor's Name)	······································
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PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name))
(Document Number)		
Certified Copies	Certificates o	of Status
Special Instructions to Filing Officer:		
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SECRETARY OF STATE
ALL AHASSEF FLORIO



July 20, 2012

Florida Dept. of State Division of Corporations 2661 W Executive Center Cir. Tallahassee, FL 32301

RE: Registration of Foreign LLC

Name: ITEX Professional Park, LLC

Christin a Chhi

To Whom It May Concern:

Please find enclosed the forms for the registration for the above referenced entity. Please fax any information to 409-721-6603 or email to chris.akbari@itexgrp.com.

Sincerely,

Christopher A. Akbari Executive Vice President.

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 ITEX Professional Park, LLC	IAIEOI PIONIOA.
(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 consent of the managers or managing members adopting the alternate Company," "L.L.C," "LLC.").	of transacting business in Florida and attach a copy of the writter ate name. The alternate name must include "Limited Liability
2. Texas (Jurisdiction under the law of which foreign limited liability company is organized) 3.	(FEI number, if applicable)
4. 9/1/2006 (Date of Organization) 5.	Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6. N/A (Date first transacted business in Flori (See sections 608.501 & 608.502 F.S. to	da, if prior to registration.) o determine penalty liability)
7. 3735 Honeywood Court	
Port Arthur, Texas 77642 (Street Address of	Principal Office)
8. If limited liability company is a manager-managed co	_
9. The name and usual business addresses of the management	ging members or managers are as follows:
K.T. Akbari 3735 Honeywood Court Port A	Arthur, Texas 77642
Christopher Akbari 3735 Honeywood Court	t, Port Arthur, TX 77642
10. Attached is an original certificate of existence, no more than 90 days the jurisdiction under the law of which it is organized. (A photocopy is translation of the certificate under oath of the translator must be submit	is not acceptable. If the certificate is in a foreign language, a
translation of the certificate under oath of the translator must be submit 11. Nature of business or purposes to be conducted or purposes.	promoted in Florida: Real Estate
Signature of a member or an auth (In accordance with section 608.408(3), F.S., the execut penalties of perjury that the facts stated herein are true document to the Department of State constitutes a	norized representative of a member. I am aware that any false information submitted in a third degree felony as provided for in s.817.155, F.S.)
K.T. Akbari	

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	f the Limited Liability Company is:
ITEX P	rofessional Park, LLC
If unavailable,	the alternate to be used in the state of Florida is:
2. The name ar	nd the Florida street address of the registered agent and office are:
	Corporation Service Company
	(Name)
	1201 Hays Street
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
	Tallahassee, FL 32301
	City/State/Zip
liability compan agent and agree relating to the pi	ned as registered agent and to accept service of process for the above stated limited at the place designated in this cartificate, I hereby accept the appointment as registered to act in this capacity. I further agree to comply with the provisions of all statutes roper and complete performance of my duties, and I am familiar with and accept the 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)

COVER LETTER

Registration Section Division of Corporations

TO:

	Name of Limited Liability Company
The enclosed "Application by Foreig Existence, and check are submitted	n Limited Liability Company for Authorization to Transact Business in Florida," Certificate of register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence cor	cerning this matter to the following:
Christopher A	kbari
	Name of Person
ITEX Professi	onal Park, LLC
	Firm/Company
3735 Honeyv	rood Court
	Address
Port Arthur, T	exas 77642
	City/State and Zip Code
chris.akbari	Ditexgrp.com mail address: (to be used for future annual report notification)
E- For further information concerning t	
For further information concerning	
Christopher Akba	
Name of	Person Area Code & Daytime Telephone Number
MAILING ADDRESS:	STREET ADDRESS:
Division of Corporations Registration Section	Division of Corporations Registration Section
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the fol	
\$125.00 Filing Fee \$1	30.00 Filing Fee & \$\int\\$\$\\$155.00 Filing Fee & \$\int\\$\$\\$160.00 Filing Fee, Certificate of Status & Certified Copy

Hope Andrade Secretary of State

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



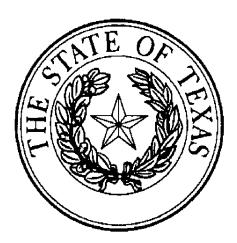
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Itex Professional Park, LLC (file number 800702770), a Domestic Limited Liability Company (LLC), was filed in this office on September 01, 2006.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on July 20, 2012.



Hope Andrade Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB