Document Number Only 00000707 660 EAST JEFFERSON STREET Requestor's Name 32301 TALLAHASSEE, FL Address 222-1092 Phone State City CORPORATION(S) NAME rastield & Gorrie, L.1 -10/30/97--01112--002 ****285.00 ****285.00 () Profit () Merger () Amendment () NonProfit Limited Liability Co. () Mark () Dissolution/Withdrawal Foreign () Annual Report () Other () Limited Partnership () Change of R.A. () Reservation () Reinstatement) Fictitious Name Filing () Photo Copies () Certified Copy After 4:30 Call if Problem () Call When Ready Pick Up () Will Wait Document Examin'er Acknowled

CR2E031 (1-89)

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:

L.C." if not so contained in the nar	ne at present.)	the words "limited company" or the	n anniewiatioli
Delaware	3.	Applied for	
urisdiction under the law of which ompany is organized)	foreign limited liabi	lity (FEI number, if appl	icable) 97 0
September 22, 1997	5.	perpetual	コ 元
(Date of Organization	n)	(Duration: Year limited liability cease to exist or "perpetual")	company will Company will Company
Upon Regist			— 5 <u>-</u>
(Date first transacted 729 South 30th Street,		See sections 608.501, 608.502, and labama 35233	817.155, F.S <u>.)</u> 글
	(Street address of pr	incipal office)	
t name, title, and business ad ill manage the foreign limited	dress of each man	aging member[MGRM] or man	ager[MGR]who
ill manage the foreign limited	dress of each man liability company	aging member[MGRM] or man in Florida: (attach additional paname NAME & ADDRESS:	ager[MGR]who age if necessary) TITLE:
ill manage the foreign limited NAME & ADDRESS: M.M. Gorrie	l liability company TITLE: Manager	in Florida: (attach additional pa	age if necessary)
ill manage the foreign limited NAME & ADDRESS:	TITLE: Manager	in Florida: (attach additional pa	age if necessary)
rill manage the foreign limited NAME & ADDRESS: M.M. Gorrie 729 South 30th Stree	TITLE: Manager	in Florida: (attach additional pa	age if necessary)
rill manage the foreign limited NAME & ADDRESS: M.M. Gorrie 729 South 30th Stree	TITLE: Manager	in Florida: (attach additional pa	age if necessary)
ill manage the foreign limited NAME & ADDRESS: M.M. Gorrie 729 South 30th Stree	TITLE: Manager	in Florida: (attach additional pa	age if necessary)
rill manage the foreign limited NAME & ADDRESS: M.M. Gorrie 729 South 30th Stree	TITLE: Manager	in Florida: (attach additional pa	age if necessary)
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vill manage the foreign limited NAME & ADDRESS: M.M. Gorrie 729 South 30th Street	TITLE: Manager	in Florida: (attach additional pa	age if necessary)
ill manage the foreign limited NAME & ADDRESS: M.M. Gorrie 729 South 30th Stree	TITLE: Manager	in Florida: (attach additional pa	age if necessary)
vill manage the foreign limited NAME & ADDRESS: M.M. Gorrie 729 South 30th Street	TITLE: Manager	in Florida: (attach additional pa	age if necessary)

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of			
Brasfield & Gorrie, L.L.C.	deposes a	and sa	ays:
1) the above named limited liability company has at least two members.			
2) the total amount of cash contributed by the member(s) is \$ 100,000.00	_ ·	97 007	01870 038 038
3) if any, the agreed value of property other than cash contributed by member(s) is	CT .		국선 성독교
\$ A description of the property is attached and made a	part herete	7 2-D	CORPO CORPO
4) the total amount of cash or property anticipated to be contributed by member(s		=	STATE RATIONS
\$100,000.00 . This total includes amounts from 2 and 3 above.		£	₹5

Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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 IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:	
Brasfield & Gorrie, L.L.C.	
2. The name and address of the registered agent and office is:	
	97 97
C T Corporation System	S 55
(Name)	OCT 27
1200 South Pine Island Road	ORF S
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)	RAFIO 1: L
Plantation, Florida 33324	∓ 85
(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.

Dale W. Morris, Asst. Vice President

October 24, 1997

(Date)

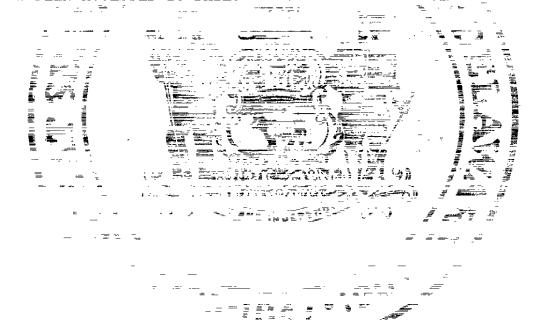
Filing Fee: \$ 35 for Designation of Registered Agent

State of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BRASFIELD & GORRIE, 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 TWENTY-FIRST DAY OF OCTOBER, A.D. 1997.

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





Edward J. Freel, Secretary of State

AUTHENTICATION:

8714189

2799194 8300

DATE: