# L05000003166

2505 AUG 22 A 11: 40 SECRETARY DE STATE (Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies \_ Certificates of Status DO5/34680 Special Instructions to Filing Officer:

Office Use Only



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07/15/05--01006--016 \*\*96.25

08/01/05--01021--003 \*\*33.75



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

FILED

THE TARY OF STATE TALLAHASSEE, FLORIDA

July 20, 2005

GARY STEVE NELSON 1543 KISH BLVD. TRINITY, FL 34655

SUBJECT: CORNWALL MANAGEMENT COMPANY, LLC

Ref. Number: W05000034680

We have received your document for CORNWALL MANAGEMENT COMPANY, LLC and your check(s) totaling \$96.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 905A00047652

### CORNWALL MANAGEMENT COMPANY, LLC 3905 Frontier Park Avenue, Cheyenne, Wyoming 82001

2005 AUG 22 A 11: 40

July 12, 2005

Division Of Corporations P. O. Box 6327 Tallahassee, Fl 32314 SECRETARY OF STATE TALLAMASSEE, FLORIDA

Dear Sir/Madam:

Please see herewith an application to register CORNWALL MANAGEMENT COMPANY, LLC with the state of Florida. The contact person is Gary Steve Nelson, Managing Member with daytime phone number being 727-376-9746. The acknowledgment should be sent to the attention of Gary Steve Nelson, 1543 Kish Blvd., Trinity FL 34655.

Thank you in advance for your assistance with this matter.

Sincerely,

Gary S. Nelson Managing Member

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#### TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

205 AUG 22 A 11: 40
MECNETARY OF STATE
MALLAHASSEE, FLORIDA

SUBJECT: COENWall Hanagenest, LLC
(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:

(Name of Person)
(Firm/Company)
1543 Kish Blud
(Address)
Thinky FL 34655 (City/State and Zip Code)

For further information concerning this matter, please call:

GARY	s. Nelson	at (727) 376 9746
l	(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, Florida 32314

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee	☐ \$130.00 Filing Fee &	☐ \$155.00 Filing Fee &	☐ \$160.00 Filing Fee, Certificate
	Certificate of St	atus Certified Copy	of Status & Certified Copy

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA TRANSACT BUSINESS IN FLORIDA CECCETARY OF STATE TALLAHASSEE. 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: (Jurisdiction under the law of which foreign limited liability company is organized)

3. 70 - 29099

(FEI number, If approximately approximate (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 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: 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.) 

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.)

Typed or printed name of signee

### FILED

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE 7005 AUG 22 A 11: 40

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE ORIDA UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

		ی	•	')
2. The name and the Flo	orida street address o	of the register	ed agent and offic	e are:
	GARY S.	NEZS	ν <sub>α</sub> ν	
·		(Name)		
	1543 Kish	Blud		
- <del></del>	Florida Street Addr	ess (P.O. Box 1	NOT ACCEPTABLE)	
	TRINITY	FL		<u></u>
		City/State/7	in	

Colnwall Management Confany

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)

1. The name of the Limited Liability Company is:

\$ 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 Wyoming**

Office of the Secretary of State



United States of America, State of Wyoming

SS.

I, JOSEPH B. MEYER, Secretary of State of the State of Wyoming, do hereby certify that CORNWALL MANAGEMENT COMPANY, LLC, a limited liability company organized under the laws of the State of Wyoming, did on 05/26/2005, file its Articles of Organization in the Office of the Secretary of State of Wyoming, and is in good standing at the date of this certificate.

I FURTHER CERTIFY that this certificate is not to be construed as an endorsement, recommendation, or notice of approval of the limited liability company's financial condition or business activities and practices, as this information is not available from the records of this office.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Wyoming. Done at Cheyenne, the Capital, this 10th day of August A.D., 2005.

Secretary of State

By Disa Jayaler