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	- Company,	
Nolan Family Limited Liability	Company;	
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		****125.00 ****125.00
() Profit () Nonprofit	() Amendment	() Merger
Foreign	() Dissolution/Withdrawal () Reinstatement	() Mark
()Limited Partnership	() Annual Report () Name Registration	() Other () Change of RA
() Certified Copy	() Fictitious Name () Photocopies	() UCC () CUS
() Call When Ready (x) Walk In () Mail Out	() Call If Problem () Will Wait	() After 4:30 (x) Pick Up
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Verifier W.P. Verifier	10 ×	Amount: \$

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

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## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 1, 2001

CT CORPORATION SYSTEM

SUBJECT: NOLAN FAMILY LIMITED LIABILITY COMPANY

Ref. Number: W01000004699

We have received your document for NOLAN FAMILY LIMITED LIABILITY COMPANY, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$125.00.

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).

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6025.

Trevor Brumbley Document Specialist

Letter Number: 501A00012732

## 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:

	(Name of	foreign limit	ed liability compa	iny)	=	
Oklahoma		3.		356-32-0588		•
(Jurisdiction under company is organi	the law of which foreign limited l	iability	(FE	I number, if applic	able)	<u> </u>
12/30/98 (Da	te of Organization)	5, _	Perpetual (Duration: Year	limited liability cor	mpany will cease to	<del></del> -
March 2	•		exist or "perpetu	al")		
(D	ate first transacted business in Flor	ida. (See sec	tions 608.501, 60	8.502, and 817.155	5, F.S.)	• • •
Suite_70	0, 2431 East 61st Str	et				<u> </u>
Tulsa, O	klahoma 74136-1267			٠		
	(Street	address of p	rincipal office)			<del>-</del>
If limited liabil	lity company is a manager-m	anaged cor	npany, check h	ете 🗴		
The usual busing	ness addresses of the managi	ng membe	s or managers	are as follows:		
James H.	Nolan, II				-	
Suite 70	0, 2431 East 61st Stre	et:			•	<del>-</del> -
Tulsa, O	klahoma 74136-1267	드				
Attached is an original reduction	ginal certificate of existence, no mon	e than 90 day	s old, duly authenti	cated by the official	having custody of	records in
slation of the certifi	he law of which it is organized. (A partie under eath of the translator mus	st be submitte	d.)	ne ceruncaie is in a	rofeigh language, a	
general	iness or purposes to be condu partner of Sheehan Pip ctivity which limited	e Line (	Construction	Company and	any other	lawful
	Janua H /	elonik			NSSE!	F) 28
	Signature of a member of a member of a member of the section 608. an affirmation under the penaltic	408(3), F.S., t	he execution of this	document constitute	er.	Kin Millo: 57
	James H. Nolan,	II		<u> </u>		<u>.</u>
	Typed or	printed nat	ne 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:	
Nolan Family I	Limited Liability Company	
2. The name	and the Florida street address of the registered agent and office are:	
	C T Corporation System	<u></u>
	(Name)	
	Plantation FL 33324	
	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 as provided for in Chapter 608, F.S..

C T Corporation System
(Signature)

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

OI FEB 28 MILES FILES OI SECRETARY OF STATE FALLWHASSEE, FLORIDA

