

## **MEMORANDUM**

TO:

REGISTRATION SECTION

**DIVISION OF CORPORATIONS** 

FROM:

STEPHANIE JOYNER

DATE:

**JANUARY 7, 2002** 

\*\*\*\*160.00

SUBJECT:

FOGELMAN MANAGEMENT GROUP

Attached are the "Application to Transact Business" and the appropriate fees for the above referenced entity. Also attached is a current "Certificate of Existence" for this entity. Please note that there is a statement about this entity being delinquent in the payment of Franchise and Excise taxes in the state of Tennessee. The return has been filed and the taxes have been paid; however, 2001 was the 1st year that these taxes were due and there was a discrepancy in the amount owed so the return was late. This delinquency has to do with penalties and interest and our accountant is in the process of having these penalties abated.

If you have any questions, please feel free to call me at 901-762-6764.

Thank You

# 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:

1.	1. Fogelman Management Group, LLC				
	(Name of foreign limited liability company)				
2.	Tennessee 3, 62-1679568				
	(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)				
4.	March 10, 1997  (Date of Organization)  5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")				
6.					
	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)				
7.	5400 Poplar Avenue, 2nd Floor				
	Метрhis, TN 38119				
	(Street address of principal office)				
8.	If limited liability company is a manager-managed company, check here  The name and usual business addresses of the managing members or managers are as follows:  See Attached  See Attached				
9.	The name and usual business addresses of the managing members or managers are as follows:				
	See Attached E See				
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.)				
11	. Nature of business or purposes to be conducted or promoted in Florida: Property Management				
	Ahnh Rondlester, Eyec. VP				
	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

John A. Randles, III

### FOGELMAN MANAGEMENT GROUP MANAGERS 5400 POPLAR AVE., 2ND FLOOR MEMPHIS, TN 38119

**CHIEF MANAGER** 

RICHARD L. FOGELMAN

**PRESIDENT** 

JEFFREY L. KELLY

**EXECUTIVE VICE PRESIDENT/** 

ASSISTANT SECRETARY/TREASURER

JOHN A. RANDLES, III

VICE PRESIDENT/SECRETARY

**KEVIN Q. JACKSON** 

VICE PRESIDENT

MARK FOGELMAN

VICE PRESIDENT

STANLEY BAKER

VICE PRESIDENT

**DEBBIE MILLWOOD** 

VICE PRESIDENT

MARY BRADLEY

VICE PRESIDENT

**PATTIE WOODS** 

**VICE PRESIDENT** 

ROBERT LONG, JR

(Business addresses for all managers are the same as the company)

DIVISION OF CORPORATIONS

# 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.

. The name of	the Limited Liability Compa	iny is:	
Fogeln	man Management Group,	LLC	
2. The name an	d the Florida street address o	of the registered agent and office are:	
	CT Corporation	(Name)	· · · · · · · · · · · · · · · · · · ·
	1200 South Pine Is	sland Road ress (P.O. Box <u>NOT</u> ACCEPTABLE)	
	Plantation (C	FL 33324 City/State/Zip)	·
liability compar registered agen statutes relating accept the oblig	ny at the place designated in t t and agree to act in this cape g to the proper and complete p gations of my position as regis	to accept service of process for the abouth it is certificate, I hereby accept the applacity. I further agree to comply with the performance of my duties, and I am fantstered agent as provided for in Chapter	e provisions of all wife for the first of all with and with and wife for the first of all wife for the first of the first
See Attac	(Signature)  \$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Designation of Registered Agent Certified Copy (optional)	AM II: 09

P.02/02

### ACCEPTANCE OF APPOINTMENT

RE: Fogelman Management Group, L.L.C.

Pursuant to Sections 48.091 and 607.0501, Florida Statutes, the undersigned acknowledges and accepts its appointment as registered agent of the above corporation and agrees to act in the capacity and to comply with the provisions of the Florida Business Corporation Act (1990) relative to keeping open the registered office at the address specified above. The undersigned is familiar with, and accepts the obligations of, Section 607.0505, Florida Statutes.

Dated: January 7, 2002

C T CORPORATION SYSTEM

John J. Linnihan

Assistant Vice President

Secretary of State
Division of Business Services
312 Eighth Avenue North
6th Floor, William R. Snodgrass Tower
Nashville, Tennessee 37243

ISSUANCE DATE: 12/21/2001 REQUEST NUMBER: 01355519 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 03/10/1997 STATUS: ACTIVE CORPORATE EXPIRATION DATE: 03/10/2047 CONTROL NUMBER: 0326876 JURISDICTION: TENNESSEE

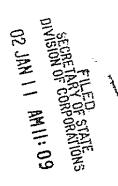
TO: \_ FOGELMAN MANAGEMENT GROUP STEPHANIE JOYNER 5400 POPLAR AVE MEMPHIS, TN 38119 REQUESTED BY:
FOGELMAN MANAGEMENT GROUP
STEPHANIE JOYNER
5400 POPLAR AVE
MEMPHIS, TN 38119

#### CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"FOGELMAN MANAGEMENT GROUP, LLC"

THAT THE LIMITED LIABILITY IS DELINQUENT IN THE PAYMENT OF FRANCHISE AND EXCISE TAXES;
THAT THE MOST RECENT LIMITED LIABILITY ANNUAL REPORT REQUIRED HAS BEEN FILED;
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF THE EXISTENCE HAVE NOT BEEN FILED.



FOR: REQUEST FOR CERTIFICATE

ON DATE: 12/21/01

RECEIVED:

FEES \$20.00

\$0.00

TOTAL PAYMENT RECEIVED:

\$20.00

RECEIPT NUMBER: 00002974301 ACCOUNT NUMBER: 00333470

FROM: FOGELMAN PROPERTIES, LLC 5400 POPLAR AVENUE SUITE 200 MEMPHIS, TN 38119-0000



RILEY C. DARNELL SECRETARY OF STATE