102000001833

FACILITY SPECIALISTS 10564 Ditch Lane Rockvale, TN 37153

TO:

Florida Department of State

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

FROM:

Keith Carey

SUBJECT:

Transmittal Letter

DATE:

July 11, 2002

The following are attached for your review.

Certificate of Existence Application by Foreign Limited Liability Co. For Authorization to Transact Business in Florida Certificate of Designation of Registered Agent/Registered Office Check for \$125.00

If you have any questions please feel free to contact me at 615-274-2866. Thank-you

in advance.

Name Availability Document Examiner Updater Updater ~ ~C Verifyer Acknowledgement DCC $u \cup U$ W. P. Verifyer

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. 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. Facility Spacialists LLC: (Name of foreign limited liability company)
(Ivalite of foreign infinited flability company)
2. <u>Tennessee</u> (Jurisdiction under the law of which foreign limited liability 3. <u>62-1855/61</u> (FEI number, if applicable)
company is organized)
4. Sept 200 5. Perpetual (Duration: Vear limited liability company will cease to exist or "perpetual")
(Date of Organization) (Duration: Year limited liability company will cease to
exist or "perpetual")
6. ANTICAPPE 8/1/02 (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
(Date this transacted business in Fronda. (See sections 608.501, 608.502, and 817.155, F.S.)
7. 10564 arch CANE, ROCHUME IN 37153
(Street address of principal office)
9. Yeli
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:
Rick Thurman - 1818 Chaster Ct Munfred has Tu 37153 5 = =
Rick Thursday 1818 Abacker At Muchan Tu 371, 50 =
Rick Thurman-1818 Chester Ct, Murfrees boro TN 371289
OM CA
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 Natura Stationard
11. Nature of business or purposes to be conducted or promoted in Florida: New Construction
and or Remodel
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.)
KEITH W CARRY
Typed or printed name of signes

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 nam	ne of the Limited Liability Company is:	
<u>Faci</u>	lity Specialists LLC.	
2. The nam	ne and the Florida street address of the registered agent and office are:	•
	DOUGLASS B_CAREY (Name)	
*	29250 DORRALL #539 Florida street address (P.O. Box NOT ACCEPTABLE)	FILE 02 JUL 15 SECRETARY TALLAHASSEI
	CLEARWATER FL 34621 (City/State/Zip)	TILED 15 AM (0: 1 RRY OF STA SSEE, FLOR

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.

Louglon Brang (Signature)

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

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

ISSUANCE DATE: 05/30/2002 REQUEST NUMBER: 02150580 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 09/28/2001 STATUS: ACTIVE CORPORATE EXPIRATION DATE: PERPETUAL CONTROL NUMBER: 0414978 JURISDICTION: TENNESSEE

TO: SCOTT GRIFFIN 556 COOP RD

REQUESTED BY: SCOTT GRIFFIN 556 COOP RD

BELL BUCKLE, TN 37020

BELL BUCKLE, TN 37020

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT "FACILITY SPECIALISTS LLC"

A LIMITED LIABILITY COMPANY DULY FORMED UNDER THE LAW OF THIS STATE WITH DATE OF FORMATION AND DURATION AS GIVEN ABOVE; THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE EXISTENCE OF THE LIMITED LIABILITY COMPANY HAVE BEEN PAID: THAT THE MOST RECENT LIMITED LIABILITY ANNUAL REPORT REQUIRED HAS NOT 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: 05/30/02

FACILITY SPECIALISTS, LLC 10564 DITCH LANE

FEES \$40.00

TOTAL PAYMENT RECEIVED:

RECEIVED:

\$0.00 \$40.00

RECEIPT NUMBER: 00003095059 ACCOUNT NUMBER: 00381686

ROCKVALE, TN 37153-0000



RILEY C. DARNELL SECRETARY OF STATE