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| Ginn Seven Eagles, LLC | | | | |
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| () Foreign | () Dissolution/Withdrawal | () Mark | | |
| | () Reinstatement | | | RX-1 |
| () Limited Partnership | () Annual Report | () Other | | 33E |
| (x)LLC | () Name Registration | () Change of RA | 3 | 850 850 |
| registration | () Fictitious Name | () UCC | | RSI AB |
| () Certified Copy | () Photocopies | _ (x) CUS | 19 | Y OF STATE CORPORATIONS |
| () Call When Ready | () Call If Problem | () After 4:30 | | • |
| (x) Walk In | () Will Wait | (x) Pick Up | | |
| () Mail Out | | , | | |
| Name | 8/15/02 | Order#: 5539674 | | |
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| 660 East Jefferson Street | 13 (4) | TO VICE | پېسو ₃سو _{چاسو} ړ | 65.1 |

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

A CCH LEGAL INFORMATION SERVICES COMPANY

BECEIVED



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

August 16, 2002

CT SYSTEM

ATTN: CONNIE BRYAN

SUBJECT: GINN SEVEN EAGLES, LLC

Ref. Number: W02000023846

We have received your document for GINN SEVEN EAGLES, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6958.

Lee Rivers Document Specialist

Letter Number: 102A00048612

RECEIVED 12 MILES 12

* Please back date filing to: August 15 th.

Thanks!

Laura

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:

| Ginn Sove | n Eagles, LLC | | | | |
|----------------------------|-------------------------------------|---|--------------------------|--|---------------|
| • | | (Name of fo | reign limit | ed liability company) | |
| Georgia | | · | 3. <u>1</u> | V/A | |
| (Jurisdictio company is | n under the law of which organized) | i foreign limited liab | ilīty | (FEI number, if applicable) | |
| August I | 4, 2002 | | 5 <u>.</u> | Perpetual | |
| | (Date of Organizatio | n) | | (Duration: Year limited liability company vexist or "perpetual") | vill cease to |
| Upon que | lification | | | | · |
| | V | | • | tions 608.501, 608.502, and 817.155, F.S.) | |
| · | Suite 300 | , 1 Floric | la Par | k Drive South, Palm (| Cogat, Egg |
| | E1 2 | 2137 | | | |
| | FL, 3 | (Street a | idress of p | rincipal office) | FEET SEED |
| 3. If limite | d liability company i | s a manager-man | aged cor | npany, check here 🗵 | S PM |
| . The usua | al business addresses | of the managing | member | rs or managers are as follows: | :: 1:S |
| 215 Cele | bration Place, Suite 200 | | | | |
| | D. 0.4045 | | | | |
| Celebrati | on, FL 34747 | | | | |
| | | | | | |
| | | | | | |
| | | | | | - |
| he jurisdiction | | tisorganized (A.ph | otocopy is: | s old, duly authenticated by the official having not acceptable. If the certificate is in a foreign val) | |
| 1. Nature | of business or purpo | ses to be conduc | ted or pr | omoted in Florida: Any and | all |
| hism | ess not snorif | ically mobile | ited to | o limited liability companies | under laws |
| he State | of Florida. | Delas 1 | M | | |
| | | | | rized representative of a member. | |
| | (In accordan | ce with section 608.40 on under the penalties | 8(3), F.S., of periury t | the execution of this document constitutes that the facts stated herein are true.) | |
| | John G. M | | | | |
| | | | rinted na | me 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.

| The name of the Limited Liabili | ry Company is: | <u> </u> |
|------------------------------------|--|-------------|
| 2. The name and the Florida street | address of the registered agent and office | e are: |
| C T Corporation System | ń | |
| | (Name) | DIVIS 02 |
| c/o C T Corporation Sy | stem, 1200 South Pine Island Road | 02 AUG 15 |
| Florida s | treet address (P.O. Box NOT ACCEPTABLE) | |
| Plantation | FL 33324 | PH 1 |
| | City/State/Zip | . 19 |

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.

CT Corporation System

Conne Bryan
Special Assir-Secy.

\$ 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

Corporation's Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 DOCKET NUMBER : 022260477
CONTROL NUMBER : 0240853
DATE INC/AUTH/FILED: 08/14/2002
JURISDICTION : GEORGIA
PRINT DATE : 08/14/2002
FORM NUMBER : 211

PENNY J. FARR MORRIS, MANNING & MARTIN, LLP 3343 PEACHTREE RD., STE. 1600 ATLANTA, GA 30326

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

GINN SEVEN EAGLES, LLC A GEORGIA LIMITED LIABILITY COMPANY

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate cof cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the abovenamed entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Cathy Cox Secretary of State