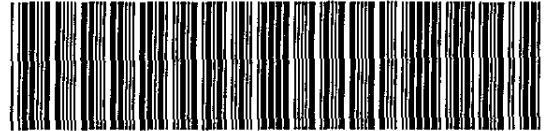


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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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Mary G. Jack  
Michael J. Ciccarone  
A. Paul Mollé  
Paul A. Ryan

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SEVENTH JUDICIAL CIRCUIT  
TALLAHASSEE, FLORIDA  
\* Board Certified Civil Trial  
\* Board Certified Business Litigation

Writer's Direct Line:

(239) 332-9425

[jrice@gbclaw.com](mailto:jrice@gbclaw.com)

May 28, 2003

Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

Re: L. M. Brookhaven, L.L.C.

Dear Sir or Madam:

Enclosed herein please find the original Application by Foreign Limited Liability Company for Authorization to Transaction Business in Florida, together with original certification of Certificate of Good Standing from the State of Illinois for L.M. Brookhaven, L.L.C. Please file the original and provide us with a certified copy.

Our firm check in the amount of \$155.00 is enclosed representing the \$100.00 Application fee, \$25.00 fee for Designation of Registered Agent, and \$30.00 for a certified copy.

Thank you for your assistance in this matter.

Very truly yours,

GOLDSTEIN, BUCKLEY, CECHMAN,  
RICE & PURTZ, P.A.

BY  J. JEFFREY RICE

JJR:smd  
Enclosures

**OTHER OFFICES**

CAPE CORAL  
(941) 574-5575

LEHIGH ACRES  
(941) 368-6101

NAPLES  
(941) 262-4888

PORT CHARLOTTE  
(941) 624-2393

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA

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03 MAY 30 PM 3: 53

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. L. M. Brookhaven, L.L.C.  
(Name of foreign limited liability company)
2. Illinois  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. applied for  
(FEI number, if applicable)
4. April 9, 2003  
(Date of Organization)
5. December 31, 2008  
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon qualification  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 6N697 Brookhaven Drive  
St. Charles, FL 33175  
(Street address of principal office)

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:

Curt Hurst  
6N697 Brookhaven Drive  
St. Charles, IL 60175

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: The transaction  
of any or all lawful business for which limited liability  
companies may be organized pursuant to Florida statute

[Signature]  
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.)

Curt Hurst

Typed or printed name of signee

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

CLERK OF STATE  
TALLAHASSEE, FLORIDA

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:

L.M. Brookhaven, L.L.C.

2. The name and the Florida street address of the registered agent and office are:

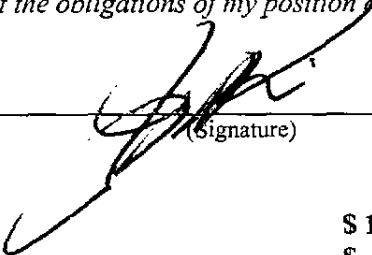
J. Jeffrey Rice  
(Name)

1515 Broadway

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Fort Myers, FL 33901  
(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.*

  
(Signature)

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

File Number 0089702-7



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# STATE OF ILLINOIS

## OFFICE OF THE SECRETARY OF STATE



INST# 5824844 Official Records BK 03935 PG 0208 RECORDED 05/15/2003 03:58:40 PM  
CHARLIE GREEN, CLERK OF COURT, LEE COUNTY  
DEPUTY CLERK J MILLER

*To all to whom these Presents Shall Come, Greeting:*

*I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that*

L.M. BROOKHAVEN, L.L.C.,  
HAVING ORGANIZED IN THE STATE OF ILLINOIS ON APRIL 09, 2003,  
APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED  
LIABILITY COMPANY ACT OF THIS STATE RELATING TO THE FILING  
OF THE ARTICLES AND PAYMENT, AND IS ORGANIZED TO TRANSACT  
BUSINESS IN THE STATE OF ILLINOIS.



*In Testimony Whereof, I, hereto set  
my hand and cause to be affixed the Great Seal of  
the State of Illinois, this 13TH  
day of MAY A.D. 2003.*

*Jesse White*

SECRETARY OF STATE