Division of Corporations Public Access System

#### Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H03000267808 I)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : FLORIDA FILING & SEARCH SERVICES

Account Number : 120000000189\_ Phone : (850)668-4318 Fax Number : (850)668-3398

#### LIMITED LIABILITY AMENDMENT

CROW RIVER RANCH, L.C.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing

Public Access Help

\$500

FLORIDA FILING
CAPITOL SERVICES

PAGE 02/02

40300000 7808

## ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 602.4115, F.S., this document is being submitted within the required 30

husiness days to correct the attached articles of organization or application to transact business in Florida. FIRST The name of the limited liability company is: CROW RIVER RANCH LC SECOND: The articles of organization or the application to transact business (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT м Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: HAMBONG MEHBER LAST <u>OR</u> Was defectively signed. The manner in which the document was defectively signed and the appropriate correction is as follows: SEPTEMASE Signature of a member or authorized representative of a member ALBRIGHT TR Typed or printed name of signee

525.00

530.00 (eptional)

Filing Fee:

Certified Copy:

CR2E062(3A00)

08/22/2003 11:55 .8506683398

FLORIDA FILING

PAGE 82

09/21/2003 ps:36

8004323622

CAPITOL SERVICES

PAGE 82/84

H03000259393

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

IN COMPLIANCE WITH SECTION 602503, PLOVIDA STATUTES, LIMITED LIBELLITY COMPANY TO TRANSACT BUSINESS IN THE S	STATE OF FLORIDA:	Wallings to Australiant.	ta 1. Order-ch. t
I. Show Awar Rough Life (Name of foreign lim	lied liability company)		
2 (Aurisdiction under the law of which foreign limited liability company is organized)	(PEI number,	if epplicable)	<del>1</del>
4. Silve (c 7 (Date of Organization) 5.	(Duration: Year limited it	ibility company will cense	Tio Tio
6. (Date first transacted trusiness in Marida. (See se	cotions 508,501, 504,502, wn	#17.(55, F.S.)	
7. TIZ PALLETO AUE		·	
MELAGUALE Filed address of	962 principal office)	<del></del>	13 Min 22
B. If limited Hability company is a manager-managed co	ompany, check here 🗹		- 8
9. The name and usual business addresses of the manag	ing members or manag	ers are as follows:	
STEVEN MONORN 712 Parky		LITERUM NEL F	32901
STEVEN MONORN 712 PONN	ALL DIE MA	Littleun we. F	32901
C. Dayeaumes Endez	£1.		32901
- 4	£1.	es.	somer.
Jones Chuton August Ta	ge old, duly authenticated by oppis not acceptable. If the c	er set ends	Admirk BZCO
C. Pausaumes Enicia.  Tourists Chilettone manhayout Tourists Chilettone manhayout Tourists.  Washed is moriginal certificate of existence, no more than 90 de the jurisdiction under the law of which it is organized. (A photo	aye old, duly sufficient by apprished by apprished. If the colonilied.)	er ender ender	Admirk BZCO
C. Developed Energy Tourists Chilettons Perfections To Watered L. Permen 3305  10. Attribution original certificate of existence, no more than 90 de the jurisdiction under the law of which the organized. (A photoe touristion of the certificate under outs of the translator must be a	aye old, duly sufficient by apprished by apprished. If the colonilied.)	er ender ender	Admirk BZCO
Touches Continue Authoritant Touches Continue L. Person 3305  10. Anachad is an original certificate of existence, no more than 90 de the jurisdiction under the law of which the cognitive (A photoe terrelation of the certificate under codo of the translator unable at 11. Nature of business or purposes to be conducted or p	aye old, duly sufficient by apprished by apprished. If the colonilied.)	er ender ender	Admirk BZCO
Touches Continue Parameter Touches Continue L. Parameter 3305  10. Anachad is an original certificate of existence, no more than 90 de the jurisdiction under the law of which the cognitive (A photocomension of the certificate under codo of the translation of the certificate under codo of the translation must be at 11. Nature of business or purposes to be conducted or p	aysold dely suffernicated by apprisent acceptable. (The colomited) arometed in Florida:	tenticial leving clasedy militaria in a forcign lang	Admirk BZCO

HOBANAC9393

08/22/2003 11:55

8506683398

08/21/2003 88:35

8004323622

FLORIDA FILING

PAGE 23

PAGE 83/84

CAPITOL SERVICES

403000259393

#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415 of 608.307, 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:
Chow River RAVELL Lie
2. The name and the Florida street address of the registered agent and office are:
STEVEN J. MONHON (Name)
Plorida street address (P.D. Box NOT ACCEPTABLE)
ME-Governe FL 32901 (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 agent as accept the provisions of all stoutes relating to the proper and complete performance of my duties, and I am familiar with and accept the highly aligns of my position as registered agent as provided for in Chapter 608, F.S.  (Signature)
\$ 100.00 Filing Fee for Application

\$ 100.00 Filing Fee for Application
5 25.00 Designation of Registered Agent
5 30.00 Certified Copy (aptional)
5 5.00 Certificate of Status (optional)

Hn 2000259393

CAPITOL SERVICES

103000 354292

# SECRETARY OF STATE STATE OF MONTANA

#### CERTIFICATE OF EXISTENCE

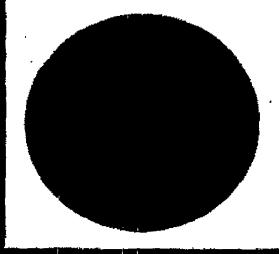
I. Bob Brown, Secretary of State of the State of Montana, do hereby cartify that

#### CROW RIVER RANCH, L.C.

Duly filed its Articles of Organization in this office on 08/19/2003, and on that date was created a limited liability company.

I finither certify that all taxes, fees and penalties owed to this state have been paid by said limited liability company and that the most recent annual report has been filed with this office.

I further certify that no articles of dissolution have been placed on record in this office by said limited liability company and my records indicate the limited liability company is in good standing under the laws of the State of Montana and authorized to transact in business and conduct its affairs in this state.



IN WITNESS WHEREOF, I have become act my hand and affixed the Great Scal of the State of Montana, at Helena, the Capital, this August 20, 2003.

Box Brown

BOB BROWN 'Secretary of State

Certified File Number: C-125944