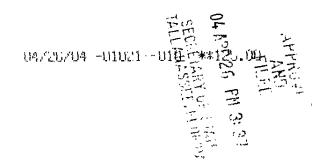
# M04000001582

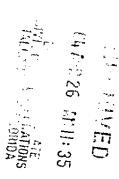
(Requestor's Name)						
(Address)						
(Address)						
(City/Chang Tip/Dhana 40)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



100030202691







#### **CT** CORPORATION SYSTEM

660 East Jefferson Street
Tallahassee, FL 3230**April 26, 2004**Tel. 850 222 1092

Fax 850 222 7615

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399

Re:

Order #: 6088652 SO

Customer Reference 1: 13802 Customer Reference 2: 40518

Dear Secretary of State, Florida:

Please file the attached:

GF Holdings, LLC (GA) Registration Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Jeffrey J Netherton Sr. Fulfillment Specialist Jeff\_Netherton@cch-lis.com 04 top 26 PM 3: 37

## 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	GF Holdings, LLC			_
	(Name of foreign	ı lim	ited liability company)	
2. G	3eorgia	3.	20-0675230	
<u>(1</u>	urisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)	-
4.	2/19/2003	5.		
	(Date of Organization)	•	(Duration: Year limited liability company will cease to exist or "perpetual")	-
6	Upon Qualification	00.0	ections 608.501, 608.502, and 817.155, F.S.)	_
	,	CC 31	sections 606.501, 606.502, and 617.155, F.S.)	
7	215 Celebration Place, Suite 200			_
	Celebration, FL 34747			_
_	(Street address	ss of	principal office)	_
8. I	If limited liability company is a manager-manage	d co	ompany, check here 🗹	
9. 1	The name and usual business addresses of the ma	nag	ring members or managers are as follows:	07
	Edward R. Ginn, III			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	215 Celebration Place, Suite 200		7.7.1 7.7.1 7.00	26
	Celebration, FL 34747			- 문
	Attached is an original certificate of existence, no more than 9 the jurisdiction under the law of which it is organized. (A ph translation of the certificate under oath of the translator must	otoc	copy is not acceptable. If the certificate is in a foreign language	
11.	Nature of business or purposes to be conducted	or I	promoted in Florida: any and all lawful	_
_	business not specifically prohibited to profit	LL	C's under the laws of the state of Florida	_
~		, F.S	norized representative of a member.	
	an animation under the penalties of pe	•	·	

Typed or printed name 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.

1. The name of the Limited Liability Company is:		
GF Holdings, LLC		
2. The name and the Florida street address of the registered agent and office are:		
CT Corporation System		
(Name)		
1200 South Pine Island Rd		
Florida street address (P.O. Box NOT ACCEPTABLE)		
Plantation, FL 33324		
(City/State/Zip)		
Having been named as registered agent and to accept service of process for the above so liability company at the place designated in this certificate, I hereby accept the appointing registered agent and agree to act in this capacity. I further agree to comply with the prostatutes relating to the proper and complete performance of my duties, and I am familian accept the obligations of my position as registered agent as provided for in Chapter 608	nent as Salar Sovisions of all rewith and Salar	TIME
(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**

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER : 0310697
DATE INC/AUTH/FILED: 02/19/2003
JURISDICTION : GEORGIA
PRINT DATE : 04/23/2004
FORM NUMBER : 211

MORRIS, MANNING & MARTIN
PENNY FARR
1600 ATLANTA FINANCIAL, 3343 PEACHTREE ROAD
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 as of the above brint date

is in compliance with the appricable filing and annual registration provisions

Said entity was formed in the jurisdiction affated above or was authorized to transact business in Georgia on the above was and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Settetary of State.

This certificate clater of to the equivariant of the above-named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve an application for withdrawal, a systement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and 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.

20040423155727917

of Title 14 of the



Cathy Cox Secretary of State