# 104000002410

855-00647-1)2963

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
4/21 FOR LC
ccetcus

Office Use Only

204-21284



200036919282

MJH .

05/27/04--01021--005 \*\*160.00

May 24, 2004

Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314

To Who It May Concern:

I am submitting my application to transact business in Florida. If you need to reach me please call 636-256-7874 or 636-262-8905.

Sincerely,

Gregory Merrill Pope

Pope Homes LLC

421 Copper Lakes Blvd Wildwood, MO 63040



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 2, 2004

GREGORY MERRILL POPE POPE HOMES LLC 421 COPPER LAKES BLVD. WILDWOOD, MO 63040

SUBJECT: POPE HOMES LLC Ref. Number: W04000021286

We have received your document for POPE HOMES LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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) 245-6967.

Letter Number: 004A00037921

Michelle Hodges Document Specialist

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

### 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: (Name of foreign limited liability company) (Jurisdiction under the law of which foreign limited liability company is organized) (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.) (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: 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 eath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: TO CONDUCT REAL ESTATE TRANSACTIONS INCLUDING PURCHASING + SELLING PROPERTIES. HOME REHAB AND ANY AND ALL LAWFUL BUSIN WHICH A LIMITED LIABILITY COMPANY MAY BE ORGANIZED. 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.) MERRIUPOPE GREGORY

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:

2. The name and the Florida street address of the registered agent and office are:	
CLAIRE GUITAR	
(Name)	
209 ROBIN HOOD CIRCLE UNITI	ol
Florida street address (P.O. Box NOT ACCEPTABLE)	·
NAPLES FL 34104 (City/State/Zip)	
(Chy/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.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

# STATE OF MISSOURI



#### Matt Blunt Secretary of State

## CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, MATT BLUNT, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

#### POPE HOMES LLC LC0055256

was created under the laws of this State on the 17th day of September, 2001, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 14th day of June, 2004

Secretary of State

Certification Number: 6780960-1 Reference:

Verify this certificate online at http://www.sos.mo.gov/businessentity/verification