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Edward F. Long
Senior Vice President and Chief Financial Officer

tel 704-561-5293 fax 704-523-7110 nlong@crosland.com

August 27, 2004

Florida Department of State Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

RE: Crosland County Line, LLC

Dear Sir or Madam:

Enclosed please find an Application By Foreign Limited Liability Company For Authorization To Transact Business In Florida and an original Certificate of Existence from the North Carolina Secretary of State for Crosland County Line, LLC. Our check in the amount of \$160.00 to cover standard application fee, designation of registered agent, certified copy and certificate of status is also included.

If you find the enclosed to meet your approval, please file the Application for Authority to Transact Business in Florida. We look forward to receiving your acknowledgement letter soon.

Thank you for your assistance.

Very truly yours,

Med Shap

Edward F. Long Senior Vice President

EFL/mm Enclosures OF STATE OF STATE TAIL AHASSEE TI OBINA

#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Crosland County Line, LLC		
(Name of Limi	ited Liability Company)	
The enclosed "Application by Foreign Limited Liab Florida," Certificate of Existence, and check are sub liability company to transact business in Florida.	bility Company for Authorization to Transact Busi bmitted to register the above referenced foreign li	iness in mited
Please return all correspondence concerning this ma	atter to the following:	
Cathleen N. Hardman		
(Nan	ne of Person)	
Crosland, Inc.		
(Firm	m/Company)	
227 W. Trade St., Suite 800	Address)	
Charlotte, NC 28202		
	te and Zip Code)	
For further information concerning this matter, plea	-	
Melanie Mastalski	_at (704 ) 561-5225	. 43S fi
(Name of Person)	(Area Code & Daytime Telephone Number)	- =
STREET ADDRESS:	MAILING ADDRESS: $\mathbb{Z}^{\square}$	
Registration Section	Registration Section	三 三 元
Division of Corporations	Division of Corporations	* *
409 E. Gaines Street	P.O. Box 6327	,
Tallahassee, Florida 32399	Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of S	☐ \$155.00 Filing Fee & <b>☑</b> \$160.00 Filing Fee, Certificatus Certified Copy of Status & Certificatus	

### 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 Fore	ign Limited Liability Company)
North Carolina	3. On Order
(Jurisdiction under the law of which foreign limit company is organized)	
August 23, 2004	5 Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
Expected to by before December 31, 2004	
(Date first transacted b (See sections 608.501 &	usiness in Florida, if prior to registration.) 608.502 F.S. to determine penalty liability)
227 W. Trade St., Suite 800, Charlotte, NC	
(Sti	reet Address of Principal Office)
The name and usual business addresses	of the managing members or managers are as follows:
Crosland, Inc., 227 W. Trade St., Suite 800	, Charlotte, NC 28202
Crosland, Inc., 227 W. Trade St., Suite 800	A
Crosland, Inc., 227 W. Trade St., Suite 800	O, Charlotte, NC 28202  ALL AH  P
	OH SEP
Attached is an original certificate of existence, no n	nore than 90 days old, duly authenticated by the official having custody of records (A photocopy is not acceptable. If the certificate is in a foreign language, a
Attached is an original certificate of existence, no nequisition under the law of which it is organized aslation of the certificate under oath of the translator	nore than 90 days old, duly authenticated by the official having custody of records (A photocopy is not acceptable. If the certificate is in a foreign language, a
Attached is an original certificate of existence, no nequisition under the law of which it is organized aslation of the certificate under oath of the translator	nore than 90 days old, duly authenticated by the official having custody of records (A photocopy is not acceptable. If the certificate is in a foreign language, a must be submitted.)
Attached is an original certificate of existence, no negurisdiction under the law of which it is organized aslation of the certificate under oath of the translator.  Nature of business or purposes to be co	nore than 90 days old, duly authenticated by the official having custody of records (A photocopy is not acceptable. If the certificate is in a foreign language, a must be submitted.)

an affirmation under the penalties of perjury that the facts stated herein are true.)

Cathleen N. Hardman, Visi heardent of Custand, Inc.

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.

I,	The name of the Limited Liability Company is:
Cı	rosland County Line, LLC
2.	The name and the Florida street address of the registered agent and office are:
	CT Corporation
	(Name)
	1200 S. Pine Island Road
	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 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, Florida Statutes?

(Signature)

JOAN BOLDEN

**ASSISTANT SECRETARY** 

\$ 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 North Carolina Department of The Secretary of State

## CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

#### CROSLAND COUNTY LINE, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 23rd day of August, 2004, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 30th day of August, 2004

Claime J. Marshall
Secretary of State