# MO4000003647

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Basiliess Ellis) Halley
(Document Number)
(Social National)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700040132757

UNI/UNI/U4 -01015--020 \*\*125.00

BK

O4 SEP -3 PM 2: 4 74 SEP -3 AM II: 54

SECRETARY OF STATE VISION
TALLAMASSEE, FLORIDANLES

#### **CT** CORPORATION

September 3, 2004

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

Re: Order #: 6183717 SO Customer Reference 1:

Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

\_Battle Development, LLC (FL)
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,

Ashley A Mitchell Fulfillment Specialist Ashley\_Mitchell@cch-lis.com

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615 OF SER 3 PH 2: 45



## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION 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:

Battle Development, LLC (Name of Foreign Limited	Li	ability Company)
Convois	_	20.4552005
Georgia (Jurisdiction under the law of which foreign limited liability		20-1553895 (FEI number, if applicable)
company is organized)	,	( FEI number, it applicable)
,		
August 18, 2004	5.	Perpetual
(Date of Organization)		(Duration: Year limited liability company will cease to exist or "perpetual")
Upon qualification		
(Date first transacted business in (See sections 608.501 & 608.502 F	Flor .S. t	ida, if prior to registration.) o determine penalty liability)
215 Celebration Place, Ste 200		
•		
Celebration, FL 34747		-
	ss o	Principal Office)
. If limited liability company is a manager-manage	ed c	ompany, check here 🔽
. If limited liability company is a manager-manage	ed c	ompany, check here 🗸
. If limited liability company is a manager-manage.  The name and usual business addresses of the manager.		<u> </u>
. The name and usual business addresses of the ma		<u> </u>
, , , , , ,		<u> </u>
. The name and usual business addresses of the ma		<u> </u>
Edward R. Ginn, III  215 Celebration Place, Suite 200		<u> </u>
. The name and usual business addresses of the ma		<u> </u>
Edward R. Ginn, III  215 Celebration Place, Suite 200	anaş	ging members or managers are as follows:  ys old, duly authenticated by the official having custody of recision to acceptable. If the certificate is in a foreign language, a
The name and usual business addresses of the ma  Edward R. Ginn, III  215 Celebration Place, Suite 200  Celebration, FL 34747  Attached is an original certificate of existence, no more than 9 to jurisdiction under the law of which it is organized. (A photocommunication of the communication of the law of which it is organized.	0 da	ging members or managers are as follows:  ys old, duly authenticated by the official having custody of reo is not acceptable. If the certificate is in a foreign language, a tted.)
The name and usual business addresses of the material Edward R. Ginn, III  215 Celebration Place, Suite 200  Celebration, FL 34747  Attached is an original certificate of existence, no more than 9 to jurisdiction under the law of which it is organized. (A photocomustation of the certificate under oath of the translator must be supported.	0 da	ys old, duly authenticated by the official having custody of reo is not acceptable. If the certificate is in a foreign language, a tted.)
Edward R. Ginn, III  215 Celebration Place, Suite 200  Celebration, FL 34747  O. Attached is an original certificate of existence, no more than 9 e jurisdiction under the law of which it is organized. (A photoe anslation of the certificate under oath of the translator must be suit. Nature of business or purposes to be conducted	0 da	ys old, duly authenticated by the official having custody of reo is not acceptable. If the certificate is in a foreign language, a tted.)
Edward R. Ginn, III  215 Celebration Place, Suite 200  Celebration, FL 34747  D. Attached is an original certificate of existence, no more than 9 e jurisdiction under the law of which it is organized. (A photoe anslation of the certificate under oath of the translator must be suit. Nature of business or purposes to be conducted business not specifically prohibited to profit LLC's under the certificate under oath of the translator.	0 da	ging members or managers are as follows:  ys old, duly authenticated by the official having custody of reo is not acceptable. If the certificate is in a foreign language, a tted.)  promoted in Florida: any and all lawful  he laws of the state of Florida
Edward R. Ginn, III  215 Celebration Place, Suite 200  Celebration, FL 34747  D. Attached is an original certificate of existence, no more than 9 e jurisdiction under the law of which it is organized. (A photoconslation of the certificate under oath of the translator must be suit. Nature of business or purposes to be conducted business not specifically prohibited to profit LLC's under the law of which it is organized.  Signature of a member of an element of a member of a memb	0 da	ys old, duly authenticated by the official having custody of reo is not acceptable. If the certificate is in a foreign language, a tted.)

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:
Battle Developme	ent, LLC
2. The name and	d the Florida street address of the registered agent and office are:
	CT Corporation System
	(Name)
	1200 South 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.

Connie byen Search Bed Secrety
(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 : 0449467
DATE INC/AUTH/FILED: 08/18/2004
JURISDICTION : GEORGIA
PRINT DATE : 09/02/2004
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 print date

GEORGIA LIGHTED LIABILITY COMPAN

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia annotated.

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

This certificate telates only to the legal existence 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 statement 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.

20040902145728306



Cathy Cox Secretary of State