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**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. HARBOR PLACE, LLC  
(Name of foreign limited liability company)
2. Mississippi  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 64-0866188  
(FEI number, if applicable)
4. June 4, 2004  
(Date of Organization)
5. \_\_\_\_\_  
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Planning to transact business in near future.  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 117 North Broadway Street, Tupelo, MS 38804  
(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:  
Michael D. Greer, 117 North Broadway Street, P. O. Box 907, Tupelo, MS 38802-0907  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
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 oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: purchase and develop  
investment property in the State of Florida, or other locations determined by the Members.

\_\_\_\_\_  
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.)

Michael D. Greer

\_\_\_\_\_  
Typed or printed name of signee

# GREER, PIPKIN & RUSSELL

ATTORNEYS AT LAW

ATTORNEYS:

MICHAEL D. GREER  
ANNA CATHERINE PIPKIN†  
FRANK A. RUSSELL  
JEFFREY D. LEATHERS  
VALARIE B. HANCOCK

OF COUNSEL:

MITCHELL D. COLBURN

Writer's E-Mail Address:  
mgreer@greerlawfirm.com

PHYSICAL ADDRESS:

117 NORTH BROADWAY STREET  
TUPELO, MISSISSIPPI 38804

MAILING ADDRESS:

POST OFFICE BOX 907  
TUPELO, MISSISSIPPI 38802-0907  
TELEPHONE: (662) 842-5345  
FACSIMILE: (662) 842-6870  
Website: www.greerlawfirm.com

†Also Licensed in Tennessee

OXFORD OFFICE:

128-A COURTHOUSE SQUARE  
OXFORD, MISSISSIPPI 38655

MAILING ADDRESS:

POST OFFICE BOX 547  
OXFORD, MISSISSIPPI 38655-0547  
TELEPHONE: (662) 513-3700

FROM THE DESK OF:  
MICHAEL D. GREER

September 1, 2004

Florida Department of State  
Registration Section – Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

RE: *Harbor Place, LLC*  
*Application to Transact Business in Florida*

To Whom It May Concern:

I have enclosed with this letter the following documents:

1. Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida;
2. Certificate of Existence from State of Mississippi (*this document is a duly authenticated original certificate and may be verified online at <http://www.sos.state.ms.us/busserv/corp/verify>*);
3. Our firm's check in the amount of \$160.00 made payable to the Florida Department of State to cover filing fees and the cost of a Certified copy of the Order as well as a Certificate of Status in this matter.

Your assistance and prompt attention will be certainly appreciated.

Very cordially yours,

*Michael D. Greer*

MICHAEL D. GREER

MDG/spj

Enclosures

cc: David A. Theriaque, Esq.

FILED  
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TALLAHASSEE, FL

**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:

Harbor Place, LLC

2. The name and the Florida street address of the registered agent and office are:

David A. Theriaque, Esq.

(Name)

1114 E. Park Avenue

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Tallahassee, FL 32301-2651

(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, F.S.*

David A. Theriaque

(Signature)

\$ 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 Mississippi

## Office of the Secretary of State

Eric Clark, Secretary of State  
Jackson, Mississippi

### CERTIFICATE

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such the legal custodian of the records as required by The Mississippi Limited Liability Company Act to be filed in my office do hereby certify that:

HARBOR PLACE, LLC

Formed June 3, 2004

A Mississippi Limited Liability Company has filed the necessary documents in this office and has obtained a certificate of formation under the provisions of The Mississippi Limited Liability Company Act as shown by the records in this office.

That the registered office of said Limited Liability Company is located at:

117 N BROADWAY  
PO BOX 907  
TUPELO MS 38802

and that the registered agent at that address is:

GREER, MICHAEL D

I further certify that said Limited Liability Company has paid the fees for filing the above papers required by law as shown by the records of this office and that said Limited Liability Company is in good standing to do business in Mississippi at this time.



Given under my hand  
and seal of office  
June 10, 2004

A handwritten signature in cursive script that reads "Eric Clark".

ERIC CLARK  
Secretary of State