M040000 3690

| (F | Requestor's Name) | |
|-------------------------|----------------------|---------------------------------------|
| | | |
| (F | Address) | · · · · · · · · · · · · · · · · · · · |
| | | |
| (<i>F</i> | \ddress) | |
| | | |
| (C | City/State/Zip/Phone | #) |
| PICK-UP | ☐ WAIT | MAIL |
| | | |
| (E | Business Entity Name | e) |
| | | |
| ([| Document Number) | |
| Certified Copies | Certificates o | of Status |
| | | |
| Special Instructions to | o Filing Officer: | |
| | | |
| | | ' |
| | | |
| | | |
| | | 1 |
| | | alg J |
| | | <u> </u> |

Office Use Only



200040788282

ng/ng/n4--0104n--002 **125.00

Nevada Corporate Center, Inc.

2248 Meridian Boulevard, Suite H Minden, Nevada 89423

775-782-2201 - Main 877-683-9343 - Main -Toll Free 775-824-0105 - FAX 775-284-7162 - Cammie Direct

September 2, 2004

Secretary of State Florida Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Re:

KLC Coastal Associates, LLC

Dear Clerk:

Enclosed for filing please find original and one copy of Application for Authorization for the above-captioned company. Also enclosed please find a check to cover the filing fees.

Once filed, please provide a file-stamped copy at your earliest opportunity. For your convenience you may use our Federal Express Account number – 2353 3074 1.

Thank you for your attention this request. Should you have any questions, please do not hesitate to give me a call.

Sincerely,

Cammie Warburton

Account Representative

:cw

Enclosures

TRANSMITTAL LETTER

| Division of Corporations | | | | |
|--|--|--|--|--|
| • | | | | |
| SUBJECT: KLC COASTAL ASSOCIATES, LLC | | | | |
| (Name of Limited Liability Company) | | | | |
| The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida | | | | |
| Please return all correspondence concerning this matter to the following: | | | | |
| Cammie Warburton | | | | |
| (Name of Person) | | | | |
| A CONTRACTOR OF THE PARTY OF TH | | | | |
| ALTACIAN CORPORATE SERVICES, INC. | | | | |
| (Firm/Company) | | | | |
| | | | | |
| 348 Mill Street | | | | |
| (Address) | | | | |
| (Addiess) | | | | |
| | | | | |
| Reno, Nevada 89501 | | | | |
| (City/State and Zip Code) | | | | |
| For forther information concerning this metter places calls | | | | |
| For further information concerning this matter, please call: | | | | |
| | | | | |
| Cammie Warburton at (775 284-7162 | | | | |
| (Name of Person) (Area Code & Daytime Telephone Number) | | | | |
| STREET ADDRESS: MAILING ADDRESS: | | | | |
| Registration Section Registration Section | | | | |
| 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: | | | | |
| | | | | |

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 | KLC COASTAL ASSOCIATES, LLC | |
|----|---|---------|
| • | (Name of Foreign Limited Liability Company) | |
| 2 | Wyoming (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable) | |
| 4 | 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") | en e |
| 6 | (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) | |
| 7. | 60 East Simpson Avenue | 407900 |
| | Jackson, Wyoming 83001 | |
| | (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: | |
| | Kevin Lester Carl and Leslie Jayne Carl | |
| | Post Office Box 2869 | |
| | Jackson, Wyoming 83001 | |
| th | Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recepturisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a anslation of the certificate under oath of the translator must be submitted.) | ords in |
| 1 | Nature of business or purposes to be conducted or promoted in Florida: | |
| | HOLD AND MANAGE INVESTMENTS. | |
| | 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.) Kevin Lester Carl 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: | | |
|--|-----------------|---------------------|
| KLC COASTAL ASSOCIATES, LLC | ₹c o | |
| 2. The name and the Florida street address of the registered agent and office are: | LAHA | 2 |
| CHRISTOPHER MICHAEL STONE (Name) | 3 AMII | |
| 6051 NoRTH OCEAN DRIVE # 304 Florida Street Address (P.O. Box NOT ACCEPTABLE) | I: O4 LORIDA | N _e ment |
| HOLLYWOOD FL 33019 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)

\$ 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 Wyoming

Office of the Secretary of State



United States of America, State of Wyoming

SS.

I, JOSEPH B. MEYER, Secretary of State of the State of Wyoming, do hereby certify that KLC COASTAL ASSOCIATES, LLC, a limited liability company organized under the laws of the State of Wyoming, did on 08/24/2004, file its Articles of Organization in the Office of the Secretary of State of Wyoming, and is in good standing at the date of this certificate.

I FURTHER CERTIFY that this certificate is not to be construed as an endorsement, recommendation, or notice of approval of the limited liability company's financial condition or business activities and practices, as this information is not available from the records of this office.

SEAL

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Wyoming. Done at Cheyenne, the Capital, this 25th day of August A.D., 2004.

Secretary of State

By Candia Della