# DIVISION OF POPPERADORS CONFORM OF CONFORM O

## Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)222-9428

FOREIGN LIMITED LIABILITY COMPANY

TP Eight LLC

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$160.00

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TRANSMITTAL LETTER							
TO: Registration Section Division of Corporations							
SUBJECT: TP Eight 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:							
Norbert W. Keller							
(Name of Person)							
ACL OF OF							
Townsends, Inc.							
Townsends, Inc.  (Firm/Company)  AND COMPANY  SSET							
401 S. DuPont Highway							
(Address)							
Georgetown, DE 19947							
(City/State and Zip Code)							
For further information concerning this matter, please call:							
June Melson at (302 ) 855-7115							
(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:							
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate  Certificate of Status Certified Copy of Status & Certified Copy							

FURTH-OPENIES CY Spaces Onder

#### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608:303, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: TP Eight LLC (Name of Foreign Limited Liability Company) (Jurisdiction under the law of which foreign limited liability company is organized) 20-1620489 (FEI number, if applicable) Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual") August 23, 2004 (Date of Organization) (Date first transacted business in Florids, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 401 S. DuPout Highway, Georgetown, DE 19947  $\geq$ (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here X 9. The name and usual business addresses of the managing members or managers are as follows: لنث Townsends, Inc. 爱] 401 S. DuPont Highway Georgetown, DE 19947 10. Attached is an original certificate of existence, no muse from 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 centificate is in a funcion language, a translation of the certificate under onth of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Real Estate Holdings Signature of a member of 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 pensities of porjury that the facts stated herein are true.) George C. White Vice President.

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 Com	pany is:			
	TP Eight LLC				
2. The name and th	e Florida street address	of the registered ag	ent and office are:	:	
	C.	T Corporation System		******d	
		(Name)		O ALL	
	1200	) South Pine Island Ros	ď	¥ oc	
,	Florida Street Ad	dress (P.O. Box <u>NOT</u>	ACCEPTABLE)	T-SSS	-Pin
_	Plantation	FL	33324		
		City/State/Zip		- Cor.	il and
itability company at agent and agree to a relating to the prope obligations of my po-	as registered agent and the place designated in the place designated in the capacity. I fur or and complete performs sition as registered agent Corporation System CON SPEC	this certificate, I her ther agree to comply ance of my duties, ar	eby accept the apport with the provision ad I am familiar with Chapter 608, Flori	ointment as register <mark>e</mark> us of all statutes th and accept the	:đ

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



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### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAMARE, DO HEREBY CERTIFY "TP EIGHT LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTIETH DAY OF SEPTEMBER, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



Warret Smith Mindson, Harriet Smith Windson, Sacrecary of Scate

3845857 8300

040709698

AUTHENTICATION: 3385434

DATE: 09-30-04