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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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2004 OCT 18 PM 2: 15

### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: <u>AKERSLOOT</u> , PATIELSON +AS (Name of Lim	SOCIATES PLLC ited Liability Company)
	ability Company for Authorization to Transact Business in abmitted to register the above referenced foreign limited
Please return all correspondence concerning this m	natter to the following:
LISA L. PATTI	me of Person)
AKERSLOOT, PATTELSON - ASSOCIA	me of Person)  THES /U.C.  TIM/Company)  ALC: THE PROPERTY OF
	(Address)
BLETTIOND THE 3702	ate and Zip Code)
(City/St	ate and Zip Code)
For further information concerning this matter, ple	ase call:
(Name of Person)	at ( CIS ) 376-\$100 (Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399  Enclosed is a check for the following amount:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Entrope is a shock 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

## 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:

	SLOOT, PATTERSON A	HASSOCIATES PLI Name of Foreign Limited	ر د Liab	lity Company)		<del></del>
TE	uicesca		2	67 - 1384008		
Jurisdiction company is	NESSEE on under the law of which s organized)	1 foreign limited liability	J	62 - 138 400 8 (FEI number,	if applicable)	
	9-27-1994 (Date of Organization		5	9. (Duration: Year limited lia	27-2034	
	(Date of Organizatio	on)		(Duration: Year limited lia exist or "perpetual")	oility company wil	I cease to
		11-1-04				
	(Date firs (See section	t transacted business in F ns 608.501 & 608.502 F.	lorida S. to	, if prior to registration.) letermine penalty liability)		
		477 CAPTA	INS	CIRCLE	المجالية	
		DESTIN FL	. 3	2541		8 7
		(Street Addres	s of P	<b>25Y/</b> rincipal Office)	70	00 5
If limited	d liability company i	s a manager-manage	d cor	npany, check here	25,55	温温
	w nadanay vonapanay .	o a manager manage	u 00.	pan.y, oneon note	3	T 6 79
The nam	ne and usual business	addresses of the ma	nagii	ig members or manage	rs are as follows	1957 T
l sen	n 1 damen 1	<b></b>				92
	t C. PAILERSON	5034-A THOROUGH	4 QILL	o line, brentwood	7N 37027	
CHAR	LUES AKERSLOOF E	IL SOSY-A TH	LOU	LH BRED LING BROWT	woo 1 170	27
	1183.43		diedid .			
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				old, duly authenticated by the ot acceptable. If the certifica		
islation of t	the certificate under oath o	f the translator must be sul	py is i amitte	і)	c bin a locigital	iguagu, a
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Nature	of business or purpo	ses to be conducted	or pr	moted in Florida: <u>(</u>	PA SERVICES	<u> </u>
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(CATI	ii ICO PODOS PIC	•			-	·
(CERTI	•					
((GRT)		Kui J. Patter	<b></b>	- 100		
((GRT)	Signature (In accordan	of a member or an a	utho:	ized representative of a execution of this document that the facts stated herein are to	constitutes	
(CERTI	Signature (In accordan an affirmation	of a member or an a	utho: F.S., t rjury t	ized representative of a ne execution of this document that the facts stated herein are to	constitutes	

## 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.

AKELSLOOT, PATTERION + ALSOCIATES, PLLC	
2. The name and the Florida street address of the registered agent and office are:	PE GO
EDITH M. AYERS (Name)	2. 15
477 CAPTAINS CIRCLE Florida Street Address (P.O. Box NOT ACCEPTABLE)	3075
DESTIN FL 32541 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.

Edita M. Clega.
(Signature)

1. The name of the Limited Liability Company is:

\$ 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 Division of Business Services** 312 Eighth Avenue North 6th Floor, William R. Snodgrass Tower Nashville, Tennessee 37243

ISSUANCE DATE: 09/17/2004 REQUEST NUMBER: 04261529 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 09/27/1994 STATUS: ACTIVE CORPORATE EXPIRATION DATE: 09/27/2034 CONTROL NUMBER: 0284332 JURISDICTION: TENNESSEE

ŚA L PATTERSON 34-A THOROUGHBRED BRENTWOOD. TN 37027 REQUESTED BY: LISA L PATTERSON 5034-A THOROUGHBRED LANE BRENTWOOD, TN 37027

#### CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT "AKERSLOOT, PATTERSON & ASSOCIATES, P.L.L.C."

A LIMITED LIABILITY COMPANY DULY FORMED UNDER THE LAW OF THIS STATE WITH DATE OF FORMATION AND DURATION AS GIVEN ABOVE; THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE EXISTENCE OF THE LIMITED LIABILITY COMPANY HAVE BEEN PAID: THAT THE MOST RECENT LIMITED LIABILITY ANNUAL REPORT REQUIRED HAS BEEN FILED; THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND THAT ARTICLES OF TERMINATION OF THE EXISTENCE HAVE NOT BEEN FILED.

FOR: REQUEST FOR CERTIFICATE

FROM: AKERSLOOT DEPRIEST WALL & ASSOCIATES 3401 WEST END BLDG. SUITE 665 NASHVILLE, TN 37203-0000

ON DATE: 09/17/04

RECEIVED:

FEES \$20.00

\$0.00

TOTAL PAYMENT RECEIVED:

\$20.00

RECEIPT NUMBER: 00003585690 ACCOUNT NUMBER: 00203213

RILEY C. DARNELL SECRETARY OF STATE