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(I	Requesto	r's Name)	
(/	Address)		
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PICK-UP		WAIT	MAIL
(E	Business	Entity Nam	e)
(I	Documen	t Number)	
Certified Copies	(	Certificates	of Status
Special Instructions t	o Filing C	Officer:	
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#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			-	
SUBJECT: TAW Investments LLC				
(Name of Limite	ed Liability (	Company)		
The enclosed "Application by Foreign Limited Liabi Florida," Certificate of Existence, and check are sub- liability company to transact business in Florida				
Please return all correspondence concerning this man	tter to the fol	lowing:		
M. Todd Wood				
(Nam	e of Person)		•	
TAW investments LLC				
(Firm	n/Company)	•		
P.O. Box 707	Address)		with an ex	
Springdale, AR 72765-0707			TATA TO THE STATE OF THE STATE	
(City/State and Zip Code)		50 5	ü <b>š</b>	
For further information concerning this matter, please	se call:		NOV 24 P	g weeken
Todd Wood	_ at (_ <del>479</del>	) 601-4910	maga ya	E
(Name of Person)		de & Daytime T	elephone Number	)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street	Regi Divis P.O.	LING ADDRE stration Section sion of Corporat Box 6327	ions	
Tallahassee, Florida 32399	Talla	hassee, Florida	32314	
Enclosed is a check for the following amount:				
☐ \$125.00 Filing Fee	□ \$155.00 Fi	ling Fee & \$\Boxed\$ \$\text{Striffed Copy}	160.00 Filing Fee, Cer of Status & Ce	

## 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:

TAW Investments LLC (Name of Foreign	Limited Liability Company)
Arkansas  (Jurisdiction under the law of which foreign limited	3. 77-0643591 (FEI number, if applicable)
company is organized) August 3, 2004	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
	ness in Florida, if prior to registration.) 8.502 F.S. to determine penalty liability)
3777 Belle Mead	
Springdale, AR 72762	
(Street	t Address of Principal Office)
. If limited liability company is a manager-n	nanaged company, check here
. The name and usual business addresses of	the managing members or managers are as follows:
Todd Wood, 3777 Belle Mead, Springdale, AF	R 72762
Gary Tollett, 2615 Carley Road, Springdale, A	AR 72762
Chris Arnold, 2571 Firewood Dr., Fayetteville,	
	re than 90 days old, duly authenticated by the official having custody of record a photocopy is not acceptable. If the certificate is in a foreign language, a must be submitted.)
1. Nature of business or purposes to be cond	ducted or promoted in Florida: To buy and sell improved
and unimproved real estate and to engage in a	any other business not contrary to law.
m feld Wood	
(In accordance with section 60)	or an authorized representative of a member.  8.408(3), F.S., the execution of this document constitutes  lties of perjury that the facts stated herein are true.)
M. Todd Wood	

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 Con	npany is:		
TAW investme	ents LLC			
2. The name	and the Florida street address	s of the registered a	agent and office are:	
	Business Filings Incorporate	ed		
		(Name)		
	660 East Jefferson Street			
	Florida Street As	ddress (P.O. Box NOT	[ACCEPTABLE)	
	Tallahassee	FL 3230	)1	; ≧∽ ~
		City/State/Zip		
liability compo agent and agr relating to the	named as registered agent and amy at the place designated in see to act in this capacity. I find proper and complete perform my position as registered age.	this certificate, I her other agree to compl cance of my duties, a	rrehy accept the appointm ly with the provisions of a and I am familiar with an	ent as registered ill statutes d accept the
	(Signatura)			

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

רמם והדחד



### **Arkansas Secretary of State** Charlie Daniels

State Capitol Building ♦ Little Rock, Arkansas 72201-1094 ♦ 501-682-3409

### **Certificate of Good Standing**

I, Charlie Daniels, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

#### TAW INVESTMENTS LLC

authorized to transact business in the State of Arkansas as a Limited Liability Company, filed Articles of Organization in this office August 3, 2004.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 7th day of September 2004.

Charlie Daniels

Secretary of State

Online Certificate Authorization Code: 11cbd6fa35082bd To verify the Authoriziation Code, visit www.sosweb.state.ar.us