# 0400005403

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only
//

4



200042226992

12/08/04--01036--016 \*\*125.00

12/08/04--01038--017 \*\*30.00





### **CT** CORPORATION

December 8, 2004

Department of State, Florida 409 East Gaines Street Tallahassee FL 32399



Re: Order #: 6251634 SO Customer Reference 1: Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:

Ginn Purchasing Group, LLC (GA) Registration Florida

Ginn Purchasing Group, LLC (GA)
Obtain Document - Misc - Certified Copy as Evidence of Filing Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Stephanie Sanders Fulfillment Specialist Stephanie\_Sanders@cch-lis.com

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615 APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

			2 A
	SECTION 608.503, FLORIDA STATO PANY TO TRANSACT BUSINESS IN TI	ITES, THE FOLLOWING IS SUBMITTE HE STATE OF FLORIDA:	D TOTALOISTERA FORIGI
[ Ginn Purchasing Grou	p, LLC		
**	(Name of Foreign Limited	Liability Company)	
2. Georgia	en e	3. Applied For	رن کری
(Jurisdiction under the company is organized)	law of which foreign limited liability	(FEI number, if app	licable)
4. November 19, 2004		5. Perpetual	
(Date of	Organization)	(Duration: Year limited liability of exist or "perpetual")	ompany will cease to
6. Upon Qualification	<del>-</del>		
	(Date first transacted business in (See sections 608.501 & 608.502 F	Florida, if prior to registration.) S. to determine penalty liability)	
7. 215 Celebration Place,	Suite 200, Celebration, Florida 347	747	
- C	(Street Addre	ss of Principal Office)	<del></del>
	•	•	
8. If limited liability	company is a manager-manage	ed company, check here	
9. The name and usua	al business addresses of the ma	anaging members or managers are	as follows:
Educad D. Class III	215 Calabassian Plana Societa 200 C	debuggies Floride 24747	
Edward R. Ginn, III	215 Celebration Place, Suite 200, Ce	elebration, Florida 34747	<del>,</del> .
			i
<del></del>		- 1 2 2	
<del></del>			
10 4 1 11			
_	•	O days old, duly authenticated by the offici opy is not acceptable. If the certificate is in	<u> </u>
•	under oath of the translator must be su		य ।ठाटक्षा जाहरकहर, व
		,	
11. Nature of busines	s or purposes to be conducted	or promoted in Florida: Any and a	II lawful business not
specifically prohibited	to limited liability companies under	the laws of the State of Florida, includin	g but not limited to real
estate developm	ent. Vallie	R. Diamone	<del></del> .
	Signature of a member or an a	authorized representative of a mer	nber.
	(In accordance with section 608.408(3),	F.S., the execution of this document constiterjury that the facts stated herein are true.)	
			<del></del> i
FL057 - 08/03/04 C T System Online	Typed or printe	ed name of signee	1

# 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.

Ginn Purchasing Gro	ou <del>p,</del> LLC			
2. The name and	the Florida street address of	f the registered a	gent and office are:	
	СТС	Corporation System		
		(Name)		, .
	1200 Se	outh Pine Island Ro	ad	
_	Florida Street Addre	ess (P.O. Box NOT	ACCEPTABLE)	•
_	Plantation	FL	33324	
		City/State/Zip		
liability company i agent and agree to relating to the pro obligations of my j	ed as registered agent and to at the place designated in this o act in this capacity. I furthe per and complete performance position as registered agent of CT Corporation System CONNI SPECIAL (Signature)	s certificate, I he er agree to comp ce of my duties, c us provided for ir	reby accept the appointm by with the provisions of a and I am familiar with an a Chapter 608, Florida Si	nent as registere all statutes d accept the

## **Secretary of State**

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 DOCKET NUMBER : 043380100 CONTROL NUMBER : 0469529 DATE INC/AUTH/FILED: 11/19/2004 JURISDICTION : GEORGIA PRINT DATE : 12/03/2004

FORM NUMBER : 211

MORRIS, MANNING & MARTIN LLP VALERIE DIAMOND 3343 PEACHTREE RD, NE, STE 1600 ATLANTA, GA 30326

### CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

## GINN PURCHASING GROUP, LLC A GEORGIA LIMITED LIABILITY COMPANY

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the abovenamed entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Ally Cop

Cathy Cox