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#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 11, 2005

CORPORATE ACCESS

TALLAHASSEE, FL

SUBJECT: GULF STOMPER II, LLC

Ref. Number: W05000007416

FEB 15 PH 2:59 OS FEB 15 AM ID: 38
SECRETARSEE, FLORIDA OVALLA ASSEE, FLORIDA OVALLA ASS

We have received your document for GULF STOMPER II, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$125.00 payment.

We cannot accept a non-certified printout from Georgia.

You must obtain and submit a CERTIFICATE OF EXISTENCE from the Georgia Secretary of State's office. The Certificate must be dated within the past 90 days.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Document Specialist

Letter Number: 005A00009876

Corrected +
Resubmitted for
Filing 2/14/05

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

IN LII	COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN MITTED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
	Gulf Stomper II, LLC
Į,	(Name of Foreign Limited Liability Company)
3	Georgia 3. Elo P
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
4.	February 3, 2005 5. perpetual ST 9
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6.	March 1, 2005
٠.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	1451 Cox Road
	Madison, Georgia 30650
	(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:
	Robert BraswellPennington, Sr., 1451 Cox Road, Madison, GA 30650
	The state of the s
thx	). Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in a jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a unstation of the certificate under eath of the translator must be submitted)
11	. Nature of business or purposes to be conducted or promoted in Florida: Boat Rental
	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.) Robert Brasewell Pennington, Sr.
	Typed or printed name of signee

1. The name of the Limited Liability Company is:

## 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.

Gulf Stomper	II, LLC
2. The name	and the Florida street address of the registered agent and office are:
	Robert Brasine 11 Pennington, Sr.
	(Name)
	4528 Southwinds II Drive, Sandestin Blvd South
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
	Sandestin, FL 32550 FL
	City/State/Zip
liability comp agent and ag relating to th	named as registered agent and to accept service of process for the above stated limited pany at the place designated in this certificate, I hereby accept the appointment as registered ree to act in this capacity. I further agree to comply with the provisions of all statutes e proper and complete performance of my duties, and I am familiar with and accept the f my position as registered agent as provided for in Chapter 608, Florida Statutes.  When the complete performance of my duties, and I am familiar with and accept the f my position as registered agent as provided for in Chapter 608, Florida Statutes.

\$ 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

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER : 0506934
DATE INC/AUTH/FILED: 02/07/2005
JURISDICTION : GEORGIA
PRINT DATE : 02/14/2005
FORM NUMBER ; 2:1

LIBERTY CORPORATE SERVICES, INC. PATRICIA WAUGH
11285 ELKINS ROAD, SUITE G1-B
ROSWELL, GA 30076

#### CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the neal of my office that a of the above print date

## GULF STONER II. ILC A GEORGIA LIMITED CHARLLITY COMPANY

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Gaszgia Annual registration provisions

Said entity was formed in the jurisdiction stated about or was authorized to transact business in Georgia on the micros date and has not filed articles of dissolution, certificate of Cancellation or any other similar document with the Office of the Secretary of State.

Office of the Secretary of State.

This conditions relates only to the legal existence of the above-named entity as of the print date above. It does not containly whether or not a notice of intent to dissolve an application for withdrawal, a statement of commencement of winding up or any other station document has been filed or is pending with the Secretary of State.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facic evidence that said entity is in existence or is authorized to transact business in this state.

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Cathy Cox Secretary of State