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M65-413

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: DJW Properties LLC	
	ed Liability Company)
	oility Company for Authorization to Transact Business in omitted to register the above referenced foreign limited
Please return all correspondence concerning this ma	itter to the following:
Carol Hicks	
(Nam	e of Person)
Bone McAllester Norton PLLC	
(Firm	n/Company)
511 Union Street, Suite 1600	
(<i>)</i>	Address)
Nashville, Tennessee 37219	
	te and Zip Code)
For further information concerning this matter, please	se call:
Carol Hicks	at (615) 687-2768
(Name of Person)	
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	(Area Code & Daytime Telephone Number) MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
Enclosed is a cheek for the following amount.	
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of S	☐ \$155.00 Filing Fee & \$\$160.00 Filing Fee, Certificate 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:

DJW Properties	(Name of Foreign Limited Liability Company)	
Tennessee	3. <u>20-2214878</u>	
(Jurisdiction und company is organ	der the law of which foreign limited liability (FEI number, if a mized)	pplicable)
January 12, 200	<u></u>	
(I	Date of Organization) (Duration: Year limited liability exist or "perpetual")	y company will cease to
n/a		
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
111 S. Washing	gton	
Brownsville, Te	ennessee 38012	
	(Street Address of Principal Office)	
If limited liab	bility company is a manager-managed company, check here	
	, , , , , , , , , , , , , , , , , , , ,	
The name and	d usual business addresses of the managing members or managers a	re as follows:
	d usual business addresses of the managing members or managers a	re as follows:
		re as follows:
	d usual business addresses of the managing members or managers a	re as follows:
	d usual business addresses of the managing members or managers a	re as follows:
	d usual business addresses of the managing members or managers a	re as follows:
Phil Clinton, 11	d usual business addresses of the managing members or managers a	.:
Phil Clinton, 11	d usual business addresses of the managing members or managers a 11 S. Washington, Brownsville, Tennessee 38012 riginal certificate of existence, no more than 90 days old, duly authenticated by the off	icial having custpos of re
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Secretary of State Division of Business Services 312 Eighth Avenue North 6th Floor, William R. Snodgrass Tower Nashville, Tennessee 37243

BONE MCALLESTER NORTON PLLC CAROL A. HICKS 511 UNION STREET NASHVILLE, TN 37219

ISSUANCE DATE: 01/12/2005 REQUEST NUMBER: 05012126 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 01/12/2005 STATUS: ACTIVE CORPORATE EXPIRATION DATE: PERPETUAL CONTROL NUMBER: 0484978 JURISDICTION: TENNESSEE

REQUESTED BY:
BONE MCALLESTER NORTON PLLC
CAROL A. HICKS
511 UNION STREET
NASHVILLE, TN 37219

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT "DJW PROPERTIES, LLC"

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 ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND THAT ARTICLES OF TERMINATION OF THE EXISTENCE HAVE NOT BEEN FILED.

FOR: REQUEST FOR CERTIFICATE

ON DATE: 01/12/05

RECEIVED:

FEES \$20.00

\$0.00

\$20.00

FROM:
BONE MCALLESTER NORTON PLLC/511 UNION ST
511 UNION ST
SUITE 1600
NASHVILLE, TN 37219-0000

FROM:
TOTAL PAYMENT RECEIVED:
RECEIPT NUMBER:
ACCOUNT NUMBER:

RECEIPT NUMBER: 00003626260 ACCOUNT NUMBER: 00411718



RILEY C. DARNELL SECRETARY OF STATE

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 Company is:

DJW Properties, LLC

2. The name and the Florida street address of the registered agent and office are:

J.D. Clinton 400 Fifth Avenue South, Suite 205 Naples, Florida 34102

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.

J.D. Clinton

COULT BY 3: 27
SECRETARY OF STATE