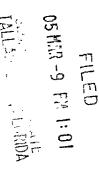
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Special Instructions to	Filing Officer:	
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02/07/05--01090--008 **160.00

SHOW

TRANSMITTAL LETTER

THE HOLD THE TEXT		
TO: Registration Section Division of Corporations		
SUBJECT: TOPCOR Augusta, LLC (Name of Limited Liability Company)		
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida		
Please return all correspondence concerning this matter to the following:		
Tames M. Gaker (Name of Person)		
TOJCOR Augusta, LLC (Firm/Company)		
12025 Industriplex Alud 39 (Address)		
Boton Ruge, LA 70809 = = =		
For further information concerning this matter, please call:		
Mark A - Starkard at (220) 753-7067 (Name of Person) (Area Code & Daytime Telephone Number)		
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:		
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & S160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy		



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 10, 2005

JAMES M. BAKER TOPCOR AUGUSTA, LLC 12025 INDUSTRIPLEX BLVD BATON ROUGE, LA 70809

SUBJECT: TOPCOR AUGUSTA, LLC

Ref. Number: W05000007151

We have received your document for TOPCOR AUGUSTA, LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6025.

Trevor Brumbley Document Specialist

Letter Number: 105A00009558

FILED

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: (Name of Foreign Limited Liability Company) (Jurisdiction under the law of which foreign limited liability company is organized) Jan 1 9002 (Date of Organization) (Duration: Year limited liability company will cease to (Date first transacted business in Florida, if prior to registration.) (See sections 608,501 & 608,502 F.S. to determine penalty liability) 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: 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Any & all 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.) James

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 Company is:	
TOPOOR Auguste, LLC	
2. The name and the Florida street address of the registered agent and office are:	
CT Corporation System (Name) (Name) (Name) (Name) (Name) Florida Street Address (P.O. Box NOT ACCEPTABLE) Plantation FL 33324 City/State/Zip	OS MAR -9 PM 1:01 SECTION SEED LONDA
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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.

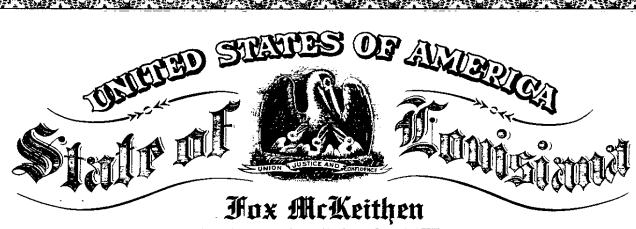
Denise Bell Assistant Secretary

\$ 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

As Secretary of State, of the State of Louisiana, I do hereby Certify that the Articles of Organization of

TOPCOR AUGUSTA, L.L.C.

Domiciled at BATON ROUGE, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on January 03, 2005,

I further certify that no Certificate of Dissolution has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on, March 3, 2005

ABA 35847738K

Secretary of State

