M05000001546

(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:						
opeolar atomospio & r milig offices.						





200048315152

03/15/05--01021--015 **155.00

FILED STATE ASSET FLORIDA



TRANSMITTAL LETTER

TO:	Registration Section Division of Corporations					
SUBJ	JECT: LBC Enterprises, L.L.C.					
J C 130		ed Liability Company)				
Florid		ility Company for Authorization to Transact Business in mitted to register the above referenced foreign limited				
Please	e return all correspondence concerning this ma	tter to the following:				
	Harlon D. Keel, Paralegal					
	(Nam	e of Person)				
TALE OF						
(Firm/Company)						
	168 North Meramec, Suite 400	/Company) ARY OF STATE Address)				
	1)	ET S				
	St. Louis, Missouri 63105					
	(City/State	e and Zip Code)				
For fu	orther information concerning this matter, pleas	e call:				
	Harlon D. Keel, Paralegal	at (314) 863-0800				
	(Name of Person)	(Area Code & Daytime Telephone Number)				
STREET ADDRESS: Registration Section Division of Corporations		MAILING ADDRESS: Registration Section				
		Division of Corporations				
	409 E. Gaines Street	P.O. Box 6327				
	Tallahassee, Florida 32399	Tallahassee, Florida 32314				
Enclos	sed is a check for the following amount:					
	☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of St	■ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate atus 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:

1 LBC Enterpris	ses, L.L.C.
	(Name of Foreign Limited Liability Company)
2. Missouri	3 20-2225832
	nder the law of which foreign limited liability (FEI number, if applicable) ganized)
4. January 24, 20	
((Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon Registra	
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 32 Ladue Mea	adows 全常
St. Louis, Miss	ssouri 63141 SR 5
	(Street Address of Principal Office)
8. If limited lia	ability company is a manager-managed company, check here
9. The name ar	nd usual business addresses of the managing members or managers are as follows:
Norton Coher	n, 32 Ladue Meadows, St. Louis, Missouri 63141
Lori Cohen, 3	32 Ladue Meadows, St. Louis, Missouri 63141
Moosylvania 1	Marketing, L.C., 32 Ladue Meadows, St. Louis, Missouri 63141
he jurisdiction und	original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records der the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a certificate under oath of the translator must be submitted.)
 Nature of b 	business or purposes to be conducted or promoted in Florida:
Real Estate ow	vnership, management and operation
	Della
	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.)
	Douglas G. Hickel
El net numbra o To	Typed or printed name of signee

FLU57 - 08/03/04 C T System Online

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.

The name and the Florida street address of the registered agent and office are:				
C T Corporation System				
(Name)				
Florida Street Address (P.O. Box NOT ACCEPTABLE)				
				Plantation
	CTC 1200 S Florida Street Addre	C T Corporation System (Name) 1200 South Pine Island Ro Florida Street Address (P.O. Box NOT	C T Corporation System (Name) 1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE)	

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.

C T Corporation System

(Signature)

A.L. Miles-Asst. Secy.

1. The name of the Limited Liability Company is:

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

STATE OF MISSOURI



Robin Carnahan Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

LBC ENTERPRISES, L.L.C. LC0634983

was created under the laws of this State on the 24th day of January, 2005, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 8th day of March, 2005

Secretary of State

