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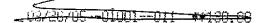
(Damiestada Nema)				
(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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SECRETARY OF STATE
ALLAHASSEE FLORIDA

#### TRANSMITTAL LETTER

TO:	Registration Section Division of Corporations		
SUBJ	ECT: Clear-Con (Name of	of Limited Liability Company)	
Florid		ed Liability Company for Authorization to Tra are submitted to register the above referenced rida	
Please	e return all correspondence concerning	this matter to the following:	
	Katt	(Name of Person)	
	Clear	- Con LLC (Firm/Company)	05 F.II
			FILED 1: 12  S MAR 28 PM 1: 12  SECRETARSSEE FYORID  ALLAMASSEE FYORID
	1770	Mecaslin Street (Address)	1: 12 STATE FUORIDI
	<u> </u>	Hanta, GA 30309 City/State and Zip Code)	<del>-</del>
For fi	urther information concerning this matt	• • •	
	Kathryn Slagle	at ( <u>404</u> ) <u>817-9990</u> (Area Code & Daytime Telephone	
	(Name of Person)	(Area Code & Daytime Telephone	Number)
	STREET ADDRESS:	MAILING ADDRESS:	
	Registration Section	Registration Section	
	Division of Corporations	Division of Corporations	
	409 E. Gaines Street	P.O. Box 6327	
	Tallahassee, Florida 32399	Tallahassee, Florida 32314	

□ \$125.00 Filing Fee \$\frac{1}{125.00}\$\$\$ \$\frac{1}{125.00}\$\$ \$\

Enclosed is a check for the following amount:

### 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. Clear - Con LLC
(Name of Foreign Limited Liability Company)

2. Georgia
(Jurisdiction under the law of which foreign limited liability 3. GEI number, if applicable)
company is organized)

4. 8 | 2 | 2002
(Date of Organization)

5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")

6. March 15 2005
(Obate first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. Ithe Mecaslin Street
Atlanta, GA 30309
(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:

Thomas Davis

1490 Mecaslin Street

Atlanta, GA 30309

19. 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

11. Nature of business or purposes to be conducted or promoted in Florida: Land clearing.

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.)

Thomas Davis

Typed or printed name of signee

translation of the certificate under oath of the translator must be submitted.)

## 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:
Clear-Con LLC
2. The name and the Florida street address of the registered agent and office are:  H. Adam Airth, Jr.  Clark, Campbell and Mawhinney, P. A. S. S. Clark, Campbell and Mawhinney, P. A. S. S. C. S. S. C. S. S. C. S. S. S. C. S.
SOO South Florida Avenue, Suite 800 For Florida Street Address (P.O. Box NOT ACCEPTABLE)
Lakeland, FL 33801 City/State/Zip

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.

H. alm Wett fr.
(Signature)

\$ 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 : 0241514
DATE INC/AUTH/FILED: 08/12/2002
JURISDICTION : GEORGIA
PRINT DATE : 02/25/2005

FORM NUMBER : 211

CLEAR-CON, LLC KATHRYN SLAGLE 1490 MECASLIN STREET ATLANTA, GA 30309

#### 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 as of the above print date

## A GEORGIA LIMITED LIABILITY COMPANY

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated.

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date 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 above-named entity as of the print date above. 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 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-facie evidence that said entity is in existence or is authorized to transact business in this state.

20050225173105760



Cathy Cox Secretary of State