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| Special Instructions to F | Filing Officer: | 10 |
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| | F NAME FLORIDA SECRETARY OF S | STATE | DATE 3/31/0 |
|---|---|--------------------|---------------------------|
| | F LAVONE FROST O FROST COMPANY M 6830 LEE HIGHWAY CHATTANOOGA, TN 37423 | FAX (| 855-4047 423) 855-1438 |
| | ☐ 1. Per our conversation | ☐ 6. Neces | sary action |
| | ☐ 2. As requested | 7. Call m | 8 |
| | ☐ 3. Information | 🖸 8. File co | ру |
| , | ☐ 4. Sign and mail accordingly | D 9. Call fo | r an appointment |
| • | ☐ 5. Sign and return to Apex | ☐ 10. Please by | mail documents |
| | Remarks: RE: BLAZAK PARTNERS ENCLOSED ARE: | , LLC | |
| | *TRANSMITTAL LETTER | | |
| | *APPLICATION BY FOREIGN FOR AUTHORIZATION TO T | | |
| | *CERTIFICATE OF DESIGNA REGISTERED OFFICE | TION OF REGI | STERED AGENT/ |
| | *CERTIFICATE OF EXISTEN | | |
| | OF STATE | | |
| | *CHECK \$130.00 - FILING | FEE | |
| | AFTER FILING, PLEASE RETURN T | O ABOVE ADDR | ESS. THANK YOU |

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TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations | |
|---|--|
| SUBJECT: BLAZAK PARTNERS, LLC | |
| (Name of Limited Liabili | ty Company) |
| (1.0000 0.2000 | outputy) |
| The enclosed "Application by Foreign Limited Liability Com Florida," Certificate of Existence, and check are submitted to liability company to transact business in Florida | |
| Please return all correspondence concerning this matter to the | e following: |
| RICHARD BLAZAK | |
| (Name of Perso | on) |
| | |
| BLAZAK PARTNERS, LLC | |
| (Firm/Compar | ıy) |
| | |
| 9225 EVENING SHADOW I | DRIVE |
| (Address) | |
| | |
| CHATTANOOGA, TN 3742 | 1 |
| (City/State and Zip | |
| | |
| For further information concerning this matter, please call: | |
| | • |
| JAMES B. FROST at (42 | |
| (Name of Person) (Area | Code & Daytime Telephone Number) |
| STREET ADDRESS: | AAILING ADDRESS: |
| | Legistration Section |
| Division of Corporations Division of Corporations | |
| 409 E. Gaines Street P | .O. Box 6327 |
| Tallahassee, Florida 32399 T | allahassee, Florida 32314 |
| Enclosed is a check for the following amount: | |
| □ \$125.00 Filing Fee | 00 Filing Fee & \$\square\$ \$160.00 Filing Fee, Certificate Certified Copy of Status & Certified Copy |

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: BLAZAK PARTNERS, LLC (Name of Foreign Limited Liability Company) (FEI number, if applicable) company is organized) MARCH 16, 2005 (Duration: Year limited liability company will cease to exist or "perpetual") (Date of Organization) (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 9225 EVENING SHADOW DRIVE CHATTANOOGA, TN 37421 (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: RICHARD BLAZAK 9225 EVENING SHADOW DRIVE CHATTANOOGA, TN 37421 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 cath of the translator must be submitted.) RENTAL PROPERTY 11. Nature of business or purposes to be conducted or promoted in Florida: 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.)

RICHARD BLAZAK

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: | |
|---|--|
| BLAZAK PARTNERS, LLC | |
| 2. The name and the Florida street address of the registered agent and office are: | |
| JAMES H. HARDY (Name) | |
| 3183 MARCUS POINT BLVD. | |
| Florida Street Address (P.O. Box <u>NOT</u> ACCEPTABLE) | |
| PENSACOLA FL 32505 City/State/Zip | |
| Having been named as registered agent and to accept service of process for the above staliability company at the place designated in this certificate, I hereby accept the appointment agent and agree to act in this capacity. I further agree to comply with the provisions of all relating to the proper and complete performance of my duties, and I am familiar with and obligations of my position as registered agent as provided for in Chapter 608, Florida Stalines (Signatyre) | ent as registerea Il statutes I accept the |

\$ 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 Division of Business Services 312 Eighth Avenue North 6th Floor, William R. Snodgrass Tower Nashville, Tennessee 37243

FROST COMPANY LAVONE FROST 6830 LEE HIGHWAY CHATTANOOGA, TN 37421

ISSUANCE DATE: 03/29/2005 REQUEST NUMBER: 05088104 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 03/22/2005 STATUS: ACTIVE CORPORATE EXPIRATION DATE: 12/31/2050 CONTROL NUMBER: 0490080 JURISDICTION: TENNESSEE

REQUESTED BY: FROST COMPANY LAVONE FROST 6830 LEE HIGHWAY CHATTANOOGA, TN 37421

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT "BLAZAK PARTNERS, 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: 03/29/05

RECEIVED: FROM: CASTLE DEVELOPMENT LLC

FEES \$20.00

\$0.00

TOTAL PAYMENT RECEIVED:

\$20.00

RECEIPT NUMBER: 00003689818 ACCOUNT NUMBER: 00275536

CHATTANOOGA, TN 37421-0000



9225 EVENING SHAEDOW

RILEY C. DARNELL SECRETARY OF STATE