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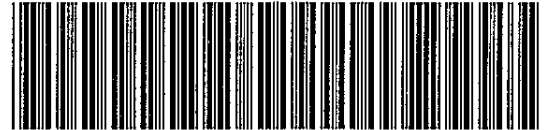
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W05-15681

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** WOOD LINES LTD  
(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:

JOHN M MURPHY  
(Name of Person)

WOOD LINES LTD  
(Firm/Company)

439 Duval St.  
(Address)

Tarpon Springs, FL 34689  
(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN M MURPHY at (727) 937-7612  
(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 & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

March 28, 2005

JAN M MURAN  
WOOD LINES LTD  
439 DENISE ST.  
TARPON SPRINGS, FL 34689

SUBJECT: WOOD LINES LTD  
Ref. Number: W05000015681

We have received your document for WOOD LINES LTD and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

You must complete number 9 of the application, the management.,

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) 245-6967.

Michelle Hodges  
Document Specialist

Letter Number: 305A00020877



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

April 4, 2005

JAN M MURAN  
WOOD LINES LTD  
439 DENISE ST.  
TARPON SPRINGS, FL 34689

SUBJECT: WOOD LINES LTD  
Ref. Number: W05000015681

We have received your document for WOOD LINES LTD and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The suffix LLC must be written at the end of the name on line 1 of the application and also on line 1 of the Registered Agent Designation page. Also, the company cannot serve as its own Manager/Managing Member. You must list an individual person or another company on line 9.

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) 245-6967.

Michelle Hodges  
Document Specialist

Letter Number: 405A00022746

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTIONS BUSINESS IN THE STATE OF FLORIDA:

1. WOOD LINES LTD- LLC  
(Name of Foreign Limited Liability Company)

2. DN/0 3. 38-3653097  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. May 3 2002 5. \_\_\_\_\_  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. Feb. 18, 2005  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 439 Denise St. Tarpon Springs, FL 34689  
(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:

Stephan L. Muran  
439 Denise St.  
Tarpon Springs, FL 34689

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: \_\_\_\_\_

Real estate investment

Jan M. Muran  
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.)

JAN M. MURAN  
Typed or printed name of signee

CSAP 11 PM 3:53

**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:

WOOD LINES LTD. LLC

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

JAN M MURAN  
(Name)

439 Denise St.  
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Tarpon Springs FL 34689  
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.*

Jan M Muran  
(Signature)

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

**United States of America  
State of Ohio  
Office of the Secretary of State**

***I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show WOOD LINES, LTD., an Ohio Limited Liability Company, Registration Number 1316552, was organized within the State of Ohio on May 03, 2002, is currently in FULL FORCE AND EFFECT upon the records of this office.***



*Witness my hand and the seal of the  
Secretary of State at Columbus, Ohio  
this 4th day of February, A.D. 2005*

*J. Kenneth Blackwell*

**Ohio Secretary of State**

**Validation Number: V200532F7A19C**