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04/18/05-01042-003 **160.00

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Oxford Furnishings, LLC		
(Name of Lin	nited Liability Company)	
	ability Company for Authorization to Transact Business in submitted to register the above referenced foreign limited	
Please return all correspondence concerning this r	natter to the following:	
Kathleen (C. Passidomo	
(Na	ame of Person)	
	F6 05	
Kelly, Passido	omo, Alba & Cassner, LLP	
(Fi	irm/Company)	
	irm/Company)	
2640 Golden	omo, Alba & Cassner, LLP irm/Company) Gate Parkway, Suite 305 (Address)	
(Address)		
	A O	
Naples	s, Florida 34105	
	tate and Zip Code)	
(0.13).0	tand and only	
For further information concerning this matter, pl	ease call:	
Kathleen C. Passidomo	at (_239) _261-3453	
(Name of Person)	(Area Code & Daytime Telephone Number)	
	MAN ING APPREC	
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
409 E. Gaines Street	P.O. Box 6327	
Tallahassee, Florida 32399	Tallahassee, Florida 32314	
i dildildisses, i lotted 20077	a material way a sound of sold a s	
Enclosed is a check for the following amount:	,	
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate o		

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.	Oxford Furnishings, LLC (Name of Foreign Limited Liability Company)	
	` · · · · · · · · · · · · · · · · · · ·	
	South Carolina (Jurisdiction under the law of which foreign limited liability company is organized) 3. 57-1043289 (FEI number, if applicable)	
4.	March 13, 1996 (Date of Organization) 5. December 31, 2050 (Duration: Year limited liability company will cease exist or "perpetual")	to
6.	N/A (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7.	16240 South Tamiami Trail, Ft. Myers, FL 33908	05 APR I
<u>ک</u>	(Street Address of Principal Office) If limited liability company is a manager-managed company, check here	B PHI
	The name and usual business addresses of the managing members or managers are as follows:	PH 12: 20
	Denise C. McPartland- 16240 South Tamiami Trail, Ft. Myers, FL 33908 James F.McPartland- 16240 South Tamiami Trail, Ft. Myers, FL 33908	.
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of a jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language instation of the certificate under oath of the translator must be submitted.)	
	. Nature of business or purposes to be conducted or promoted in Florida: real estate investment	
	Signature of atmember 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 F. McPartland	•

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:						
Oxford Furnish	ings, LLC					
2. The name	and the Florida street a	address of the registered agent and office are:				
	James McPartland					
		(Name)	_			
	16240 South Tamiami Trail					
Florida Street Address (P.O. Box NOT ACCEPTABLE)						
	Ft. Myers,	FL 33908	05 APR 18			
		City/State/Zip				
liability compo agent and agre relating to the	any at the place designo ee to act in this capacit proper and complete p	ent and to accept service of process for the above stated in this certificate, I hereby accept the appointng. I further agree to comply with the provisions of performance of my duties, and I am familiar with aredagent as provided for in Chapter 608, Florida S	nent as registered all statutes nd 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)

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

OXFORD FURNISHINGS LLC, A Limited Liability Company duly organized under the laws of the State of South Carolina on March 13th, 1996, with a duration that is at will, has as of this date filed all reports due this office, including its most recent annual report as required by section 33-44-211, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-44-809 of the South Carolina Code, and that the company has not filed articles of termination as of the date hereoff.

Given under my Hand and the Great Seal of the State of South Carolina this 13th day of April, 2005.

Mark Hammond, Secretary of State