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	(Requesto	r's Name)	
	(Address)		
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	(City/State	/Zip/Phone	#)
PICK-U	P 🗆	WAIT	MAIL
	(Business	Entity Nam	е)
<u> </u>	(Documen	t Number)	
Certified Coples		Certificates	of Status
Special Instruction	s to Filing C	Officer:	
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Office Use Only



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W05-29328

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SECRETARY OF STATE
TALLARISEE. FLORIDA

CT CORPORATION

June 14, 2005

Department of State, Florida 409 East Gaines Street Tallahassee FL 32399



Re: Order #: 6385453 SO Customer Reference 1:

Customer Reference 2:

Dear Department of State, Florida:

Please file the attached:

Ginn Financial Services, LLC (GA) Registration Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to the attention of the undersigned.

If for any reason the enclosed cannot be filed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Jennifer Murphy
Fulfillment Specialist
Jennifer_Murphy@cch-lis.com

1203 Governors Square Boulevard Tallahassee, FL 32301-2960 Tel. 850 222 1092 Fax 850 222 7615



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 14, 2005

CT CORPORATION SYSTEM

SUBJECT: GINN FINANCIAL SERVICES, LLC

Ref. Number: W05000029328

SUM IN PH 2: WA

We have received your document for GINN FINANCIAL SERVICES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6043.

Joey Bryan Document Specialist

Letter Number: 505A00041249

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IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT RUSINESS. IN THE STATE OF FLORIDA.

Gi	nn Financial Services, LLC
•	(Name of Foreign Limited Liability Company)
Ge	orgia 3 13-4300418
(Jui	isdiction under the law of which foreign limited liability (FEI number, if applicable) apany is organized)
6/	10/05 5. Perpetual
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
. U	oon qualificaton
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
. 21	5 Celebration Place, Ste. 200
Ce	elebration, FL 34747
	(Street Address of Principal Office)
. If	limited liability company is a manager-managed company, check here 🗸
. Ti	te name and usual business addresses of the managing members or managers are as follows:
	obert F. Masters
2	15 Celebration Place, Suite 200
<u>C</u>	elebration, FL 34747
e juri	tached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recor sdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a tion of the certificate under oath of the translator must be submitted.)
1. N	lature of business or purposes to be conducted or promoted in Florida: any and all lawful
bu	siness not specifically prohibited to profit LLC's under the laws of the state of Florida
	Round & Farm
	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.)

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. T	The name of the Limited Liability Company is:			
Ginn	n Financial Services, LLC	 		
2. T	The name and the Florida street address of the registered agent and office are:			
	CT Corporation System			
	(Name)			
	1200 South Pine Island Road			
	Florida Street Address (P.O. Box NOT ACCEPTABLE)			
	Plantation FL 33324			
	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.



\$ 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 DOCKET NUMBER : 051610418

CONTROL NUMBER : 0540276

DATE INC/AUTH/FILED: 06/10/2005

JURISDICTION : GEORGIA

PRINT DATE : 06/10/2005

FORM NUMBER : 211

PENNY J. FARR
MORRIS, MANNING & MARTIN LLP
3343 PEACHTREE RD NE SUITE 1600
ATLANTA, GA 30326

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

GINN FINANCIAL SERVICES, LLC A GEORGIA LIMITED LIABILITY COMPANY

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated 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 abovenamed entity as of the date issued. 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 certificate is issued pursuant to 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.



Ally Cop

Cathy Cox Secretary of State